

TT20-MW01

STATE OF NEVADA
DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT



OFFICE USE ONLY

Log No. 105284
Permit No. _____
Basin 101

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

Please complete this form in its entirety in
accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 61819

1. OWNER DEPT OF NAVY, WAS FALLON ADDRESS AT WELL LOCATION 4755 Pastore Rd
 MAILING ADDRESS 4755 Pastore Rd Fallon, NV 89496
 Subdivision Name: WAS FALLON County: Churchill

2. LOCATION N 1/4 SW 1/4 Sec 22 T 16 N R 29 E Latitude 39.406736 NAD 27 UTM E 11S03571622 NAD 27
 PERMIT/WAIVER No. JRP Longitude 118.722418 N 4363320 NAD 83/WGS 84

Issued by Water Resources Parcel No. DD61611-01

3. WORKED PERFORMED
 New Well Replace Recondition
 Deepen Other

4. PROPOSED USE
 Domestic Irrigation Test Cable Rotary RVC
 Municipal/Industrial Monitor Stock Air Other Aggr

5. WELL TYPE
 Cable Rotary RVC
 Air Other Aggr

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
DID NOT SAMPLE				
2007 DEC -3 PM 2:52				

9. WELL CONSTRUCTION

Depth Drilled 18 Feet Depth Cased 18 Feet

HOLE DIAMETER (BIT SIZE)

From	To
<u>8</u> Inches	<u>0</u> Feet <u>18</u> Feet
Inches	Feet
Inches	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2"</u>		<u>SCH. 40</u>	<u>0'</u>	<u>18'</u>

Perforations:

Type of perforation Manufactured slotted
 Size of perforation 1010

From	To
<u>3</u> feet	<u>18</u> feet
feet	feet
feet	feet
feet	feet
feet	feet

Annular Seal: Yes No

Neat Cement 0' to 5' Pumped Poured
 Cement Grout to Pumped Poured
 Concrete Grout to Pumped Poured
 ≥30% Bentonite Grout to Pumped Poured

Gravel Pack: Yes No 2 1/2' to 18' Pumped Poured
 Type: 2/16 Sand

Bentonite Chips: Yes No 1' to 2 1/2' Pumped Poured
 Type: 3/8 Bentonite chips

Date started: 11-13-07 : 20 07
 Date completed: 11-13-07 : 20 07

7. Water Level
 Static water level: 6' feet below land surface
 Artesian Flow: _____ G.P.M. _____ P.S.I.
 Water Temperature: _____ °F
 Quality: _____

8. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Bregg Drilling Contractor
 Address 950 Howe Rd Contractor
Martinez CA 94553
 Nevada contractor's license number _____
 issued by the State Contractor's Board C23-0038113
 Nevada driller's license number issued by the _____
 Division of Water Resources, the on-site driller M-2328

Signed Juan Jeff
 Driller performing actual drilling on site or contractor

Date 11-13-07