

PLUGGED BY
NWI # 64690

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

OFFICE USE ONLY
Log No. 109646
Permit No. _____
Basin 181

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. 64689
64589-3

1. OWNER F & P Construction ADDRESS AT WELL LOCATION 850 W Williams
MAILING ADDRESS 9070 Double Diamond Parkway Fallon, NV 89406
Reno, NV 89521 Subdivision Name: _____ County: Churchill

2. LOCATION S 25 T 19N N/S R 28 E Latitude 39.47514 UTM E NAD 27
PERMIT/WAIVER No. DEW-81 Longitude 118.78679 N NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

3. WORKED PERFORMED
 New Well Replace Recondition
 Deepen Other Dewatering
4. PROPOSED USE
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock
5. WELL TYPE
 Cable Rotary RVC
 Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Sand		0	25	30
Clay	X	25	30	5
<u>39.475222°N</u>				
<u>118.786864°W</u>				
(AND) 27 TR				
2009 DEC 24 11:53				

9. WELL CONSTRUCTION

Depth Drilled	Feet	Depth Cased	Feet
30		30	

HOLE DIAMETER (BIT SIZE)

Inches	From	Feet	To	Feet
22	30		0	

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8.265	8.26	.508	30	0

Perforations:

Type of perforation	Wall Screen
Size of perforation	0.032
From 10 feet to 30 feet	
From _____ feet to _____ feet	
From _____ feet to _____ feet	
From _____ feet to _____ feet	
From _____ feet to _____ feet	

Annular Seal: Yes No

<input type="checkbox"/> Neat Cement	to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Cement Grout	to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout	to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input checked="" type="checkbox"/> 230% Bentonite Grout	0 to 3	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured

Gravel Pack: Yes No 3 to 30 Pumped Poured
Type: _____ 3/8"

Bentonite Chips: Yes No _____ to _____ Pumped Poured
Type: _____

*See Plugging Log 109645

Date started: 23-Oct 20 09
Date completed: 23-Oct 20 09

7. Water Level

Static water level: 4 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: Cool °F
Quality: Unknown

8. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			

10. DRILLER'S CERTIFICATION

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

Name Parsons Drilling, Inc
Contractor
Address P.O. Box 1265
Contractor
Fallon, NV 89407

Nevada contractor's license number _____
issued by the State Contractor's Board 29064

Nevada driller's license number issued by the
Division of Water Resources, the on-site driller 1753

Signed [Signature]
Driller performing actual drilling on site or contractor

Date 2-Nov-09