

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

OFFICE USE ONLY 109998  
Log No. \_\_\_\_\_  
Permit No. \_\_\_\_\_  
Basin 793

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. 65181

1. OWNER Parker Ranch (Gail F. or Eudeene T. Parker) ADDRESS AT WELL LOCATION Deep Creek  
MAILING ADDRESS P.O. Box 6067  
ibapah, UT 84034 Subdivision Name: \_\_\_\_\_ County: White Pine

2. LOCATION NW 1/4 SW 1/4 Sec 3534 T 25N N/S R 70 E Latitude 40.0001N UTM E  NAD 27  
PERMIT/WAIVER No. 00825001 Longitude 114.0498W N  NAD 83/WGS 84  
Issued by Water Resources Parcel No. \_\_\_\_\_

3. WORKED PERFORMED  New Well  Replace  Recondition  
 Deepen  Other

4. PROPOSED USE  Domestic  Irrigation  Test  Monitor  
 Municipal/Industrial  Stock

5. WELL TYPE  Cable  Rotary  RVC  
 Air  Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
top soil		0	2	2
silt stone & gravel		2	40	38
sand & gravel	x	40	43	3
brown clay		43	60	17
silt stone & gravel	x	60	90	30
40,000163° N				
114,048962° W				
NAD 27 (R)				
200 JAN - 4 PM 1:00				

9. WELL CONSTRUCTION

Depth Drilled 90 Feet Depth Cased 90 Feet

HOLE DIAMETER (BIT SIZE)

From	To	From	To
<u>10 5/8</u> Inches	<u>0</u> Feet	<u>90</u> Feet	<u>90</u> Feet
_____ Inches	_____ Feet	_____ Feet	_____ Feet
_____ Inches	_____ Feet	_____ Feet	_____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Fl. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>		<u>.188</u>	<u>+1</u>	<u>90</u>
_____	_____	_____	_____	_____

Perforations:

Type of perforation mill slot  
Size of perforation 3 1/16 x 3

From	feet to	From	feet to
<u>70</u>	<u>90</u>	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Annular Seal:  Yes  No

<input checked="" type="checkbox"/> Neat Cement	<u>0</u> to <u>50</u>	<input checked="" 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 type="checkbox"/> ≥30% Bentonite Grout	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

Gravel Pack:  Yes  No 50 to 90  Pumped  Poured  
Type: pea gravel

Bentonite Chips:  Yes  No \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
Type: \_\_\_\_\_

Date started: Dec. 10 20 09  
Date completed: Dec. 12 20 09

7. Water Level 25 feet below land surface  
Static water level:  
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)
<u>35</u>		<u>5</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

10. DRILLER'S CERTIFICATION

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

Name Alternative Drilling  
Contractor  
Address P.O. Box 281166  
Contractor  
Lamoille, NV 89828

Nevada contractor's license number \_\_\_\_\_  
issued by the State Contractor's Board 0073955

Nevada driller's license number issued by the \_\_\_\_\_  
Division of Water Resources, the on-site driller 1689

Signed [Signature]  
By driller performing actual drilling on site or contractor

Date 12-30-09