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

OFFICE USE ONLY
Log No. 110158
Permit No.
Basin 161

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. 64702

1. OWNER Thurman Hiskett
MAILING ADDRESS P.O. Box 5009
Fallon, NV 89407

ADDRESS AT WELL LOCATION 2304 Allen RD
Fallon, NV 89406
Subdivision Name: County: Churchill

2. LOCATION SE ¼ NE ¼ Sec 2 T 18N N/S R 28 E
PERMIT/WAIVER No. 78529 (Issued by Water Resources) Parcel No.

Latitude 39.45611 Longitude -118.80248
UTM E N
☐ NAD 27 ☒ NAD 83/WGS 84

3. WORKED PERFORMED
☒ New Well ☐ Replace ☐ Recondition ☐ Deepen ☐ Other

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	Thickness
Brown Sand & Gravel		1	12	11
Brown Clay		12	26	14
Black Sand W/Clay		26	47	21
Black Clay		47	85	38
Brown Gravel & Sand	X	85	110	25

39.456110 N
118.802480 W
NAD 27

Date started: 13-Dec, 20 09
Date completed: 15-Dec, 20 09

9. WELL CONSTRUCTION
Depth Drilled 110 Feet Depth Cased 110 Feet

HOLE DIAMETER (BIT SIZE)

		From		To	
14 7/8	Inches	0	Feet	110	Feet
	Inches		Feet		Feet
	Inches		Feet		Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
10	28	.250	1	110

Perforations:
Type of perforation Mill Cut
Size of perforation 1/8"
From 100 feet to 110 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

Annular Seal: ☒ Yes ☐ No
☒ Neat Cement 10 to 0 ☒ Pumped ☐ Poured
☐ Cement Grout to ☐ Pumped ☐ Poured
☐ Concrete Grout to ☐ Pumped ☐ Poured
☒ ≥30% Bentonite Grout 10 to 100 ☒ Pumped ☐ Poured

Gravel Pack: ☒ Yes ☐ No 100 to 110 ☐ Pumped ☒ Poured
Type: 3/8" pea gravel
Bentonite Chips: ☐ Yes ☒ No to ☐ Pumped ☐ Poured
Type:

7. Water Level
Static water level: 10 feet below land surface
Artesian Flow: G.P.M. P.S.I.
Water Temperature: cool °F
Quality: Unknown

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 Parsons Drilling, Inc. (Contractor)
Address P.O. Box 1265 (Contractor)
Fallon, NV 89406
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* 2285 Gabe King
Signed (Driller performing actual drilling on site or contractor)
Date 1/7/2010 corrected 2/17/2010

(Rev. 06-08)

USE ADDITIONAL SHEETS IF NECESSARY