

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

OFFICE USE ONLY
Log No. 110676
Permit No. 77733
Basin 071

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. 64154

1. OWNER Bob Parlasca ADDRESS AT WELL LOCATION Next To Power Line
MAILING ADDRESS 561 Keystone Avenue, Box 358
Reno, Nevada 89503 Subdivision Name: _____ County: Pershing

2. LOCATION SW 1/4 NE 1/4 Sec 23 T 32N N/S R 39 E Latitude 40' 38.0279375 N UTM E NAD 27
PERMIT/WAIVER No. 77733 Longitude 117' 33.45538966 W 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
 Municipal/Industrial Monitor Stock

5. WELL TYPE
 Cable Rotary RVC
 Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
gravel and clay		0	240	
white clay		240	250	10
gravel and clay		250	400	150
basalt		400	470	70
fractured basalt		470	540	70

NAD-27 GPS
40.633892° N
117.556635° W

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2010 MAY 14 AM 11:23
STATE ENGINEERS OFFICE

9. WELL CONSTRUCTION

Depth Drilled	Feet	Depth Cased	Feet
540		540	

HOLE DIAMETER (BIT SIZE)

From	To	Feet	Feet
10 3/4	0	540	

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8		3/8	+2	540

Perforations:

Type of perforation mill slot
Size of perforation .090 X 3

From	feet to	feet
480	540	

Annular Seal: Yes No

Neat Cement to _____ Pumped Poured
 Cement Grout to _____ Pumped Poured
 Concrete Grout 0 to 200 Pumped Poured
 ≥30% Bentonite Grout to _____ Pumped Poured

Gravel Pack: Yes No 200 to 540 Pumped Poured
Type: _____
Bentonite Chips: Yes No to _____ Pumped Poured
Type: _____

Date started: 2-May, 20 10
Date completed: 5/5/2010, 20 10

7. Water Level
Static water level: 360 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: cool °F
Quality: good

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 checked="" type="checkbox"/> Air Lift	40		2

10. DRILLER'S CERTIFICATION

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

Name Hydro Resources of Nevada
Contractor
Address 4975 W. Winnemucca Boulevard
Contractor
Winnemucca, Nevada 89445

Nevada contractor's license number
issued by the State Contractor's Board 56797

Nevada driller's license number issued by the
Division of Water Resources, the on-site driller 1713

Signed S. Tompkins - Admin
By either performing actual drilling on site or contractor
Date 12-May

(Rev. 05-08)

USE ADDITIONAL SHEETS IF NECESSARY

PLD =
MMH