

EMH

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

OFFICE USE ONLY  
Log No. 110807  
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. 64955

1. OWNER Parsons Drilling, Inc.  
MAILING ADDRESS P.O. Box 1265  
Fallon, NV 89407

ADDRESS AT WELL LOCATION 405 McLean Rd.  
Fallon, NV 89406  
Subdivision Name: \_\_\_\_\_  
County: Churchill

2. LOCATION SE 1/4 NW 1/4 Sec 28 T 19N N/S R 28 E  
PERMIT/WAIVER No. 008-473-16  
Issued by Water Resources Parcel No. \_\_\_\_\_

Latitude 39.48331 N UTM E  
Longitude -118.85196 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

Material	Water Strata	From	To	Thick-ness
Sand		0	12	12
Clay		12	21	9
Coarse sandy Clay		21	24	3
Coarse sand		24	36	12
Sandy Clay		36	42	6
Coarse Sand		42	51	9
Coarse Green Sand		51	74	23
Coarse Brown Sand w/stringers of Clay		74	97	23
Fine Gray Sand		97	137	40
Coarse Gray Sand		137	153	16
Fine Sand		153	176	23
Coarse Sand	XX	176	185	9

WELL CONSTRUCTION	
Depth Drilled	185 Feet
Depth Cased	185 Feet
HOLE DIAMETER (BIT SIZE)	
From	To
12.25 Inches	0 Feet 100 Feet
10 Inches	100 Feet 185 Feet
	Inches Feet Feet

CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6.625	12.92	.188	0	15
6	4.0	.316	15	185

Perforations:	
Type of perforation	Saw Cut
Size of perforation	0.01875
From 181 feet to 185 feet	
From _____ feet to _____ feet	
From _____ feet to _____ feet	
From _____ feet to _____ feet	
From _____ feet to _____ feet	

Annular Seal: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
<input checked="" type="checkbox"/> Neat Cement	10 to 0	<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 checked="" type="checkbox"/> ≥30% Bentonite Grout	100 to 10	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Gravel Pack: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	185 to 100	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
Type:	3/8" well gravel		
Bentonite Chips: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Type:			

Date started: 10-Feb 20 10  
Date completed: 11-Feb 20 10

7. Water Level  
Static water level: 24 feet below land surface  
Artesian Flow: \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water Temperature: Cool °F  
Quality: Unknown

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.  
Address P.O. Box 1265  
Fallon, NV 89407  
Nevada contractor's license number 29064  
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2285  
Signed \_\_\_\_\_  
Date 2/15/2010

WELL TEST DATA			
TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
	20		1

(Rev. 05-06)

USE ADDITIONAL SHEETS IF NECESSARY

RD-1