

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

OFFICE USE ONLY
Log No. 110928
Permit No. 79064 79065 79066
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. 64704-1

1. OWNER Tolas Water Works Co-op
MAILING ADDRESS 1222 High St
Auburn, Ca 95603

ADDRESS AT WELL LOCATION 301 Tolas Place
Fallon, NV 89406

Subdivision Name: _____ County: Churchill

2. LOCATION NE ¼ SW ¼ Sec 31 T 19N N/S R 29 E
PERMIT/WAIVER No. 79064/79065/79066 W 648
Latitude 39.46552 UTM E NAD 27
Longitude 118.77366 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	Thickness
Brown sand		0	15	15
Brown clay w/s sand		15	36	20
Brown sand		36	54	18
Green clay		54	79	25
Green sand		79	96	17
Green clay w/s sand		96	243	147
Sand		243	273	30
Black clay		273	284	11
Black sand		284	358	74
Green clay		358	423	65
Green sand w/s clay		423	429	7
Black clay w/s sand		429	431	2
Fine Sand		431	436	5
Black sand		436	478	42
Green sand		478	488	10
Fine black sand		488	505	17
Black sand		505	518	13
Green clay		518	552	34
Black Sand		552	590	38
Hole was plugged with 20% Bentonite Grout from the bottom to 20 ft. Cement from 20 ft to surface.				

* See Plugging Log 110929

Date started: 17-Dec , 20 09
Date completed: 20-Dec , 20 09

9. WELL CONSTRUCTION

Depth Drilled 590 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet
<u>22</u>	<u>0</u>	<u>33</u>	<u>Feet</u>
<u>14</u>	<u>33</u>	<u>590</u>	<u>Feet</u>

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)

Perforations:

Type of perforation _____
Size of perforation _____

From _____ feet to _____ feet
From _____ feet to _____ feet

Annular Seal: Yes No

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

Gravel Pack: Yes No to _____ Pumped Poured
Type: _____

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

7. Water Level

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

8. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> 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 89407

Nevada contractor's license number issued by the State Contractor's Board 26094-29064
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2307

Signed Wayne Parsons
By driller performing regular drilling on site or contractor

Date 1/14/2010

USE ADDITIONAL SHEETS IF NECESSARY

2010 FEB 11 11:20 AM
NAD 27 GPS
39.466092° N
118.772675° W