

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

OFFICE USE ONLY
Log No. 112947
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. 66364

1. OWNER Florence Holt ADDRESS AT WELL LOCATION 1160 Harrigan Rd.
MAILING ADDRESS 1160 Harrigan Road Fallon, NV 89406
Subdivision Name: _____ County: Churchill

2. LOCATION NE ¼ SE ¼ Sec 31 T 19N N/S R 29 E Latitude 39.46423 N UTM E NAD 27
PERMIT/WAIVER No. 007-771-11 Longitude -118.76354 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
Brown Sand		0	28	28
Black Clay		28	30	2
Black Sand		30	36	6
Black Clay		36	77	41
Black Sand		77	93	16
Gray Clay		93	95	2
Fine Brown Sand	XX	95	115	20
Brown Clay		115	135	20
Gray Clay		135	140	5

Pumped neat cement in hole
From 140' to 115'

9. WELL CONSTRUCTION

Depth Drilled 115 Feet Depth Cased 115 Feet

HOLE DIAMETER (BIT SIZE)

From	To	Feet	Feet
12.25	0	140	Feet
Inches	Feet	Feet	Feet
Inches	Feet	Feet	Feet
Inches	Feet	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6.625	12.92	.188	0	20
6	4.0	.316	20	115

Perforations:

Type of perforation Saw Cut
Size of perforation 0.125

From	feet to	feet	feet
105	115	feet	feet
From	feet to	feet	feet
From	feet to	feet	feet
From	feet to	feet	feet
From	feet to	feet	feet

Annular Seal: Yes No

Neat Cement 0 to 10 Pumped Poured
 Cement Grout to to Pumped Poured
 Concrete Grout to to Pumped Poured
 230% Bentonite Grout 10 to 100 Pumped Poured

Gravel Pack: Yes No 115 to 100 Pumped Poured
Type: 3/8" well gravel
Bentonite Chips: Yes No to to Pumped Poured
Type: _____

7. Water Level

Static water level: 13 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)
<u>39.464312°N</u>	<u>NAD 83 D.D.</u>	
<u>118.762555°W</u>	<u>-GPS-</u>	

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 29064

Nevada driller's license number issued by the
Division of Water Resources, the on-site driller 1753

Signed Wayne
by driller performing actual drilling on site or contractor

Date 1/18/2011

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STATE ENGINEERS OFFICE