

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

OFFICE USE ONLY
Log No. 114032
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. 62248

1. OWNER US Dept of NAVY ADDRESS AT WELL LOCATION 4755 PASTURE ROAD
MAILING ADDRESS SAN DIEGO CA FALLON NV 89496
Subdivision Name: N/A County: churchill

2. LOCATION NW 1/4 NE 1/4 Sec 15 T 18 N R 29 E Latitude N 39° 25.793' UTM E NAD 27
PERMIT/WAIVER No. N/A 006-611-001 Longitude W 118° 42.919' N 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. NW-5 LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>brown silty sand</u>		<u>0</u>	<u>5</u>	<u>5</u>
<u>brown sandy silt</u>		<u>5</u>	<u>7</u>	<u>2</u>
<u>brown fine-med sand</u>	<u>8</u>	<u>7</u>	<u>10</u>	<u>3</u>
<u>brown silty clay</u>		<u>10</u>	<u>11.5</u>	<u>1.5</u>
<u>brown silty sand</u>		<u>11.5</u>	<u>13</u>	<u>1.5</u>
<u>brown fine-med sand</u>		<u>13</u>	<u>14</u>	<u>1</u>
<u>brown fine sand (SW)</u>		<u>14</u>	<u>14.5</u>	<u>0.5</u>
<u>brown fine-med sand</u>		<u>14.5</u>	<u>15</u>	<u>0.5</u>

9. WELL CONSTRUCTION

Depth Drilled 15 Feet Depth Cased 15 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
<u>10</u>	<u>0</u>	<u>15</u>		

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2</u>		<u>sch 40</u>	<u>0</u>	<u>15</u>

Perforations

Type of perforation slotted screened

Size of perforation 0.010

From 5 feet to 15 feet

Annular Seal: Yes No

Neat Cement to _____ Pumped Poured

Cement Grout to _____ Pumped Poured

Concrete Grout 1.5 to 0 Pumped Poured

20% Bentonite Grout to _____ Pumped Poured

Gravel Pack: Yes No 15 to 3 Pumped Poured

Type: Cemex sand # 2/12

Bentonite Chips: Yes No 3 to 1.5 Pumped Poured

Type: Pure Gold med chips

Date started: 6/7/14 , 20 11

Date completed: 6/7/14 , 20 11

7. Water Level

Static water level: 8 feet below land surface

Artesian Flow: NO G.P.M. N/A P.S.I.

Water Temperature: _____ °F

Quality: _____

8. N/A WELL TEST DATA

TEST METHOD: Bailor 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 DALE LEHMAN Contractor

Address 520 Edison Way Contractor

Reno NV 89502

Nevada contractor's license number 0062596 RSI

issued by the State Contractor's Board

Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-1976

Signed Dale Lehman By driller performing actual drilling on site or contractor

Date 6/7/14

(Rev. 05-08)

USE ADDITIONAL SHEETS IF NECESSARY

39.429965°N
118.714334°W NAD 27
(79)