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

OFFICE USE ONLY
Log No. 115482
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. 66360

1. OWNER Jessie Rock + Sonia Ceron
MAILING ADDRESS 17265 Pioneer Way
Fallon, Nv 89406

ADDRESS AT WELL LOCATION 17265 Pioneer Way
Fallon, NV 89402
Subdivision Name: County: Churchill

2. LOCATION SE ¼ SE ¼ Sec 1 T 18N N/S R 26 E
PERMIT/WAIVER No. 006-121-34
Issued by Water Resources Parcel No.

Latitude 39.44879 N
Longitude -119.00742 W
UTM E 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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Sand		0	10	10
Sand gravel		10	62	52
Brown Clay		62	74	12
Sand Gravel		74	220	146

Date started: 7-Nov, 20 11
Date completed: 8-Nov, 20 11

9. WELL CONSTRUCTION
Depth Drilled 220 Feet Depth Cased 220 Feet

HOLE DIAMETER (BIT SIZE)

		From		To	
11 3/4	Inches	0	Feet	220	Feet
	Inches		Feet		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	220

Perforations:
Type of perforation Saw Cut
Size of perforation 0.01875
From 203 feet to 220 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

Annular Seal: ☒ Yes ☐ No
☒ Neat Cement 10 to 0 ☐ Pumped ☒ Poured
☐ Cement Grout to ☐ Pumped ☐ Poured
☐ Concrete Grout to ☐ Pumped ☐ Poured
☒ ≥30% Bentonite Grout 10 to 50 ☐ Pumped ☒ Poured
Gravel Pack: ☒ Yes ☐ No 50 to 220 ☐ Pumped ☒ Poured
Type:
Bentonite Chips: ☐ Yes ☒ No to ☐ Pumped ☐ Poured
Type:

7. Water Level
Static water level: 164 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)

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* 2307
Signed (By driller performing actual drilling on site or contractor)
Date 11/10/2011

(Rev. 05-06)

USE ADDITIONAL SHEETS IF NECESSARY

39.448874°N NAD27
119.006427°W Dec/Deg