

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

OFFICE USE ONLY
Log No. 117318
Permit No. _____
Basin No. 101

PRINT OR TYPE IN BLACK INK 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. 68468
WELL NAME (if applicable): _____

1. OWNER/CLIENT NAME Michael Kieth
MAILING ADDRESS 5091 Sandalwood dr
Fallon NV 89406

DETAILED ADDRESS AT WELL LOCATION 5091 Sandalwood dr
Fallon NV 89406
Subdivision Name: _____ County: Churchill

2. PLS LOCATION SE 1/4 29 Sec 19 N/S 28 E
PERMIT/WAIVER NO. 008-653-14
Issued by Water Resources Current Parcel No.

Latitude UTM E 0340255 NAD 27
Longitude UTM N 4371171 NAD 83/WGS 84

3. WORKED PERFORMED
 New Well Deepen: Orig WL# _____
 Replacement: Original well log # ?
 Recondition: Original well log # _____

4. PROPOSED USE
 Domestic
 Mining / Dewater
 Test / Other
 Irrigation Monitor
 Corn / Ind Stock
 Mun / QM Rec

5. WELL TYPE
 Auger Rotary RVC
 Air Mud Sonic
 Other

LITHOLOGIC LOG					
Material Encountered	Lost Circ	Water Strata	From	To	Thick-ness
Top soil			0	1	1
Brown Sands		X	1	22	21
Brown clay			22	30	8
Grey sands		X	30	55	25
Grey clay			55	60	5
Grey Sands			60	80	20
Brown clay			80	83	3
Brown sands		X	83	98	15
Grey clay			98	102	4
Grey Sands			102	120	18
Grey clay			120	126	6
Brown sands		X	126	144	18

9. WELL CONSTRUCTION
Depth Drilled: 144 Feet Depth Cased: 144 Feet

HOLE DIAMETER (BIT SIZE)			
	From	To	
<u>10 5/8</u>	Inches	<u>0</u>	Feet <u>105</u>
<u>6 5/8</u>	Inches	<u>105</u>	Feet <u>144</u>
	Inches		Feet

CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>12.9</u>	<u>.188</u>	<u>+1</u>	<u>144</u>

PERFORATIONS:
Type of perforation: Machine slot
Size of perforation: .080
From 136 Feet To 141 Feet
From _____ Feet To _____ Feet
From _____ Feet To _____ Feet

ANNULAR MATERIALS
 Sanitary Seal 0 to 105
 Neat Cement 0 to 105 Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 Bentonite Chips _____ to _____ Pumped Poured
 Bentonite Grout _____ to _____ Pumped Poured
 15% 20% Other, explain: _____
 Gravel Pack [> 0.2 in.] _____ to _____ Pumped Poured
 Sand Pack [< 0.2 in.] _____ to _____ Pumped Poured
 Other, explain: _____ to _____ Pumped Poured

7. WATER QUALITIES
Static water level: 30' 6" Feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: cool ° Fahrenheit
Water Quality: ?

8. WELL TEST DATA

Test Method:	G.P.M.	Draw Down (Feet Below Static)	Recorded Time (Hours)
<input type="checkbox"/> Bailor <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>30</u>		<u>2 hrs</u>

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.
Name Welsco drilling Contractor
Address P.O. BOX 888 Fallon NV 89406 Contractor
Nevada contractor's license number as issued by the State Contractor's Board: 11752
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller): 17241327
Signed: Dave Anderson
By driller performing actual drilling on site or contractor
Date: 7-17-2013

RECEIVED
2013 AUG -2 AM 11:21
STATE ENGINEERS OFFICE

Replaces unknown well log
MAD27
39.457195°N
118.457235°W
Date started: 7-16 :20 13
Date completed: 7-17 :20 13