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

OFFICE USE ONLY
Log No. 117713
Permit No. R-689
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. 67706 ✓

1. OWNER Linda Lamach
MAILING ADDRESS 3057 Casey Rd
Fallon, NV 89406

ADDRESS AT WELL LOCATION 3057 Casey Rd
Fallon, NV 89406
Subdivision Name: County: Churchill

2. LOCATION NE ¼ NE ¼ Sec 34 T 19N N/S R 28 E
PERMIT/WAIVER No. R-689 (Issued by Water Resources) 008-753-09 Parcel No.

Latitude 39.47117 N
Longitude -118.82198 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	12	12
Brown Sand		12	13	1
Brown Clay		13	14	1
Gray Sand		14	98	84
Gray Clay		98	105	7
Gray Sand		105	152	47
Brown Clay		152	168	16
Brown Sand	XX	168	180	12

Date started: 5-Dec, 20 11
Date completed: 7-Dec, 20 11

9. WELL CONSTRUCTION
Depth Drilled 180 Feet Depth Cased 180 Feet

HOLE DIAMETER (BIT SIZE)

		From		To	
12.25	Inches	0	Feet	180	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	19
6	4.0	.316	19	180

Perforations:
Type of perforation Saw Cut
Size of perforation 0.125
From 175 feet to 180 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 160 to 10 ☒ Pumped ☐ Poured
Gravel Pack: ☒ Yes ☐ No 160 to 180 ☐ Pumped ☒ Poured
Type: 3/8" well grave.
Bentonite Chips: ☐ Yes ☒ No to ☐ Pumped ☐ Poured
Type:

7. Water Level
Static water level: 18 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 12/14/2011

(Rev. 05-08) 39.471253 NAD 27
118.820993

USE ADDITIONAL SHEETS IF NECESSARY

Replaces Log 27759