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

OFFICE USE ONLY
Log No. 117932
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. 68645-1

1. OWNER A&K Earth Movers,Inc.
MAILING ADDRESS P.O. Box 1159
Fallon, NV 89407

ADDRESS AT WELL LOCATION New Frontier River Parkway
Fallon, NV 89406
Subdivision Name: County: Churchill

2. LOCATION SE ¼ SW ¼ Sec 32 T 19N N/S R 29 E
PERMIT/WAIVER No. DEW-094
Issued by Water Resources Parcel No.

Latitude 39.46367
Longitude -118.75512
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~~ Dew ☐ Monitor ☐ Stock

5. WELL TYPE
☐ Cable ☒ Rotary ☐ RVC
☐ Air ☐ Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Brown Sand		0	6	6
Clay w/s Sand	X	6	30	24

RECEIVED AUG 13 2012 STATE ENGINEER OFFICE

Date started: 11-Jun , 20 12
Date completed: 11-Jun , 20 12

9. WELL CONSTRUCTION
Depth Drilled 30 Feet Depth Cased 30 Feet

HOLE DIAMETER (BIT SIZE)

		From		To	
22	Inches	0	Feet	30	Feet
	Inches		Feet		Feet
	Inches		Feet		Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8.625	8.26	.508	0	30

Perforations:
Type of perforation Well Screen
Size of perforation 0.032
From 10 feet to 30 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

Annular Seal: ☒ Yes ☐ No
☐ Neat Cement to ☐ Pumped ☐ Poured
☐ Cement Grout to ☐ Pumped ☐ Poured
☐ Concrete Grout to ☐ Pumped ☐ Poured
☒ ≥30% Bentonite Grout 0 to 3 ☐ Pumped ☒ Poured
Gravel Pack: ☒ Yes ☐ No 30 to 3 ☐ Pumped ☒ Poured
Type: 3/8' Well Gravel
Bentonite Chips: ☐ Yes ☒ No to ☐ Pumped ☐ Poured
Type:

7. Water Level
Static water level: 6 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 7/31/2012

(Rev. 05-06) USE ADDITIONAL SHEETS IF NECESSARY

39.463752 °N NAD27
118.754136 °W