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

OFFICE USE ONLY
Log No. 118014
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. 69164

1. OWNER Wallace Realty (Hinkle Jaruayporn)
MAILING ADDRESS 525 W Williams Ave.
Fallon, NV 89406

ADDRESS AT WELL LOCATION 9400 Schurz Highway
Fallon, NV 89406
Subdivision Name: County:

2. LOCATION SE ¼ NE ¼ Sec 12 T 17N N/S R 28 E
PERMIT/WAIVER No. 006-031-20
Issued by Water Resources Parcel No.

Latitude 39.35138 N
Longitude -118.78625 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
Brown Sand		0	15	15
Brown Clay		15	32	17
Black Sand		32	51	19
Black Clay		51	103	52
Black Sand	XX	103	120	17

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Date started: 27-Jun , 20 12
Date completed: 28-Jun , 20 12

9. WELL CONSTRUCTION
Depth Drilled 120 Feet Depth Cased 120 Feet

HOLE DIAMETER (BIT SIZE)

		From		To	
12	Inches	0	Feet	120	Feet
	Inches		Feet		Feet
	Inches		Feet		Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6	12.92	.188	0	20
6	12.92	.188	20	120

Perforations:
Type of perforation Saw Cut
Size of perforation 1/16"
From 115 feet to 120 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

Annular Seal: ☒ Yes ☐ No
☒ Neat Cement 5 to 105 ☒ Pumped ☐ Poured
☐ Cement Grout to ☐ Pumped ☐ Poured
☐ Concrete Grout to ☐ Pumped ☐ Poured
☐ ≥30% Bentonite Grout to ☐ Pumped ☐ Poured

Gravel Pack: ☒ Yes ☐ No 105 to 120 ☐ Pumped ☐ Poured
Type: 3/8 Gravel
Bentonite Chips: ☐ Yes ☒ No to ☐ Pumped ☐ Poured
Type:

7. Water Level
Static water level: 1 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 7/12/2012

(Rev. 05-06)

USE ADDITIONAL SHEETS IF NECESSARY

39.351461°N NAD27
118.785267°W