

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

OFFICE USE ONLY
Log No. 120500
Permit No. 55015
Basin No. 019

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. 71330

WELL NAME (If applicable):

1. OWNER/CLIENT NAME Fallon Livestock
MAILING ADDRESS 2055 Trento Lane
Fallon, NV 89406

DETAILED ADDRESS AT WELL LOCATION 2055 Trento Lane
Fallon, NV 89406

2. PLS LOCATION SE ¼ SE ¼ 14 Sec 19 N/S 27 E
PERMIT/WAIVER NO. 55015 007-131-21
Issued by Water Resources Current Parcel No.

Subdivision Name: _____ County: Churchill
Latitude 39.50618 UTM E NAD 27
Longitude 118.91395 UTM N NAD 83/WGS 84

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

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

5. WELL TYPE
 Auger Rotary RVC
 Air Mud Sonic
 Other

6. LITHOLOGIC LOG

Material Encountered	Lost Circ.	Water Strata	From	To
Top Soil			0	5
Sand/Gravel			5	14
Brown Clay			14	31
Brown Gravel			31	43
Black Clay			43	45
Black Sand/Gravel			45	52
Green Sand/Gravel			52	78
Gray Clay			78	81
Gravel			81	97
Brown Clay			97	111
Gray Clay			111	137
Gray Sand/Gravel			137	148
Gravel			148	158
Brown Sand/Gravel		X	158	175

*Replacing well log
35185
NAD 27
39.506264°N
118.912959°W*

9. INSTRUCTION
Depth Drilled: 175 Feet Depth Cased: 175 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To
<u>14</u>	<u>0</u>	<u>175</u>

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8 5/8</u>	<u>22.4</u>	<u>.250</u>	<u>0</u>	<u>175</u>

ANNULAR MATERIALS

Sanitary Seal Yes No

Neat Cement 5 to 105 Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 Bentonite Chips _____ to _____ Pumped Poured
 Gravel Pack [> 0.2 in.] 105 to 175 Pumped Poured
 Sand Pack [< 0.2 in.] _____ to _____ Pumped Poured
 Other, explain: _____ Pumped Poured

PERFORATIONS:

Type of perforation: Mill Cut
Size of perforation: 0.125

From 165 Feet To 175 Feet
 From _____ Feet To _____ Feet
 From _____ Feet To _____ Feet
 From _____ Feet To _____ Feet

Date started: 2-Jul 20 14
Date completed: 4-Jul 20 14

7. WATER QUALITIES
Static water level: 35 Feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: Cool ° Fahrenheit
Water Quality: Unkown

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>50</u>		<u>1</u>

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.
Name Parsons Drilling, Co Contractor
Address P.O. Box 1265 Fallon, NV 89406 Contractor
Nevada contractor's license number as issued by the State Contractor's Board: 29064
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller): 1759-T1
Signed: [Signature]
Date: 7/10/2014
By driller performing actual drilling on site or contractor

(Rev. 12-13)

USE ADDITIONAL SHEETS IF NECESSARY