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

OFFICE USE ONLY
Log No. 122335
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. 72881
WELL NAME *(If applicable)*:

1. OWNER/CLIENT NAME Shandra Lake
MAILING ADDRESS P.O. Box 1065
Grass Valley, CA 95945

DETAILED ADDRESS AT WELL LOCATION 4070 Sheckler Rd.
Fallon, NV 89406
Subdivision Name: *County:* Churchill

2. PLS LOCATION SE ¼ SE ¼ 33 Sec 19 N/S 28 E
PERMIT/WAIVER NO. *Issued by Water Resources* 008-711-12 *Current Parcel No.*

Latitude 39.46208 UTM E ☐ NAD 27
Longitude 118.8392 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	2
Clay			2	20
Gravel/Sand			20	28
Brown Clay			28	31
Gravel			31	46
Black Sand w/s Clay			46	58
Green Gravel w/s Sand			58	95
Brown Clay			95	111
Gray Clay w/s Sand			111	142
Green Gravel			142	156
Gray Clay			156	160
Brown Clay			160	164
Brown Gravel		X	164	170

NAD 27
39.462163°N
118.838213

Date started: 10-Apr , 20 15
Date completed: 11-Apr , 20 15

7. WATER QUALITIES
Static water level: 28 Feet below land surface
Artesian Flow: G.P.M. P.S.I.
Water Temperature: Cool ° Fahrenheit
Water Quality:

8. WELL TEST DATA
Test Method: ☐ Bailer ☐ Pump ☐ Air Lift

G.P.M.	Draw Down (Feet Below Static)	Recorded Time (Hours)
		1

9. CONSTRUCTION
Depth Drilled: 170 Feet Depth Cased: 170 Feet

HOLE DIAMETER (BIT SIZE)

		From		To	
12 3/4	Inches	0	Feet	170	Feet
	Inches		Feet		Feet
	Inches		Feet		Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.92	.188	0	12
6	4	.316	12	170

ANNULAR MATERIALS
Sanitary Seal ☐ Yes ☐ No

☒ Neat Cement	0	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	170	☒ Pumped	☐ Poured
☐ Sand Pack [< 0.2 in.]		to		☐ Pumped	☐ Poured
☐ Other, explain:		to		☐ Pumped	☐ Poured

PERFORATIONS:
Type of perforation: Saw Cut
Size of perforation: 1/8.

From	Feet	To	Feet
167	Feet	170	Feet
	Feet		Feet
	Feet		Feet
	Feet		Feet
	Feet		Feet

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.
Name Parsons Drilling, Inc. *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):* 2569
Signed: *By driller performing actual drilling on site or contractor*
Date: 4/15/2015

RECEIVED 2015 MAY 11 PM 1:29 STATE ENGINEER'S OFFICE

(Rev. 12-13) USE ADDITIONAL SHEETS IF NECESSARY pg. of pg.

Replaces Unknown Well log