

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

OFFICE USE ONLY
Log No. 123255
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. 72885
WELL NAME (if applicable): _____

1. OWNER/CLIENT NAME Charles Knittle
MAILING ADDRESS 3251 Schindler Drive
Fallon, NV 89406

DETAILED ADDRESS AT WELL LOCATION 3251 Schindler Drive
Fallon, NV 89406
Subdivision Name: _____ County: Churchill

2. PLS LOCATION NW ¼ NE ¼ 15 Sec 18 N/S 28 E
PERMIT/WAIVER NO. 006-451-03
Issued by Water Resources Current Parcel No.

Latitude 39.43042 UTM E NAD 27
Longitude 118.82448 UTM N NAD 83/WGS 84

3. WORKED PERFORMED
 New Well Deepen: Orig WL#
 Replacement: Original well log # Unknown
 Recondition: Original well log #

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

5. WELL TYPE
 Auger Rotary RVC
 Air Mud Sonic
 Other

LITHOLOGIC LOG				
Material Encountered	Lost Circ.	Water Strata	From	To
Brown Sand			0	11
Brown Clay			11	16
Brown Sand			16	38
Gray Clay			38	46
Black Silt			46	52
Gray Sand			52	82
Black Silt			82	98
Brown Silt			98	123
Brown Clay			123	136
Gray Clay			136	155
Gray Sand			155	163
Black Clay			163	190
Gray Sand			190	206
Gray Clay			206	210
Brown Sand		X	210	220

Date started: 20-Jul, 20 15
Date completed: 23-Jul, 20 15

7. WATER QUALITIES
Static water level: 32 Feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: Cool ° Fahrenheit
Water Quality: _____

WELL TEST DATA			
Test Method:	G.P.M.	Draw Down (Feet Below Static)	Recorded Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift			<u>1</u>

9. INSTRUCTION
Depth Drilled: 220 Feet Depth Cased: 220 Feet

HOLE DIAMETER (BIT SIZE)			
Inches	From	To	Feet
<u>12</u>	<u>0</u>	<u>220</u>	

CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>12.92</u>	<u>.188</u>	<u>+2</u>	<u>18</u>
<u>6</u>	<u>4</u>	<u>.312</u>	<u>18</u>	<u>220</u>

ANNULAR MATERIALS				
Material	From	To	Notes	Other
<input checked="" type="checkbox"/> Neat Cement	<u>5</u>	<u>105</u>	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Cement Grout			<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout			<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Bentonite Chips			<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Gravel Pack [> 0.2 in.]	<u>105</u>	<u>220</u>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
<input type="checkbox"/> Sand Pack [< 0.2 in.]			<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Other, explain:			<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

PERFORATIONS:
Type of perforation: Saw Cut
Size of perforation: 1/8
From 217 Feet To 220 Feet
From _____ Feet To _____ Feet
From _____ Feet To _____ Feet
From _____ Feet To _____ 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 (off-site driller): _____
Signed: Wayne Parsons
Date: 7/27/2015

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(Rev. 12-13)

USE ADDITIONAL SHEETS IF NECESSARY

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Replaces Unknown well log