

**WELL DRILLER'S REPORT**

Please complete this form in its entirety

PRINT OR TYPE ONLY

NOTICE OF INTENT NO. 5460

1. OWNER GEORGE M. WILSON ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS 160 N. CARSON ST. FALLON, NV. 89406

2. LOCATION NE 1/4 SW 1/4 Sec. 18 T. 19 N/S R. 28 E. CHURCHILL County \_\_\_\_\_  
 PERMIT NO. WVNE 3 Issued by Water Resources \_\_\_\_\_ Parcel No. \_\_\_\_\_ Subdivision Name GEORGE M. WILSON SUB.

3. TYPE OF WORK  
 New Well  Recondition   
 Deepen  Other

4. PROPOSED USE  
 Domestic  Irrigation  Test   
 Municipal  Industrial  Stock

5. TYPE WELL  
 Cable  Rotary   
 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>OVER BURDEN</u>	<u>C</u>	<u>0</u>	<u>5</u>	<u>5</u>
<u>CLAY + CEMENT GR</u>				
<u>1 1/2'</u>	<u>C</u>	<u>5</u>	<u>28</u>	<u>20</u>
<u>CLAY BROWN</u>	<u>C</u>	<u>28</u>	<u>38</u>	<u>10</u>
<u>PACKED SAND, BROWN</u>	<u>C</u>	<u>33</u>	<u>54</u>	<u>16</u>
<u>1 1/2' GRAB + BROWN</u>				
<u>SAND. COURSE</u>	<u>1 1/2'</u>	<u>54</u>	<u>60</u>	<u>6</u>

8. WELL CONSTRUCTION

Diameter 6 inches Total depth 60 feet

Casing record 6" x 12.50

Weight per foot 17.12 Thickness 1.250

Diameter	From	To
<u>6</u> inches	<u>+ 16"</u> feet	<u>60</u> feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

Surface seal: Yes  No  Type NEET

Depth of seal 05 feet

Gravel packed: Yes  No

Gravel packed from 58 1/2 feet to 60 feet

Perforations:  
 Type perforation TECH.  
 Size perforation 3/32 x 4"  
 From 55 feet to 60 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Date started 12-3, 1986  
 Date completed 12-4, 1986

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
<u>3600</u>	<u>15</u>	<u>3</u>	<u>5100</u>
_____	_____	_____	_____
_____	_____	_____	_____

9. WATER LEVEL

Static water level 14 1/2 feet below land surface

Flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.

Water temperature 61.0 °F Quality EXCELLENT

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name WATER-RITE WELL DRILLING Contractor  
 Address P.O. Box 883 Fallon, NV. 89406 Contractor

Nevada contractor's license number issued by the State Contractor's Board CC23978

Nevada contractor's driller's number issued by the Division of Water Resources 1473

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1473

Signed Sherald M. Brown By driller performing actual drilling on site or contractor

Date 12-4-86

BAILER TEST

G.P.M. \_\_\_\_\_ Draw down \_\_\_\_\_ feet \_\_\_\_\_ hours  
 G.P.M. \_\_\_\_\_ Draw down \_\_\_\_\_ feet \_\_\_\_\_ hours  
 G.P.M. \_\_\_\_\_ Draw down \_\_\_\_\_ feet \_\_\_\_\_ hours