



WELL DRILLER'S REPORT

Please complete this form in its entirety

PRINT OR TYPE ONLY

NOTICE OF INTENT NO. 7176

OWNER Edmond A. Van Den Broek ADDRESS AT WELL LOCATION _____
MAILING ADDRESS P.O. Box 1933

2. LOCATION NE 1/4 NE 1/4 Sec. 21 T. 18 N. S. R. 28 E. Churchill County
Fallon, NV. 89406

PERMIT NO. NONE Issued by Water Resources | 006-432-69 Parcel No. | PARCEL # 2 of HAT LAND + DEVELOPMENT Subdivision Name

3. TYPE OF WORK	4. PROPOSED USE	5. TYPE WELL
New Well <input checked="" type="checkbox"/> Recondition <input type="checkbox"/> Deepen <input type="checkbox"/> Other <input type="checkbox"/>	Domestic <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Municipal <input type="checkbox"/> Industrial <input type="checkbox"/>	Test <input type="checkbox"/> Cable <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Stock <input type="checkbox"/> Other <input type="checkbox"/>

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>OVERBURDEN</u>	<u>0</u>	<u>0</u>	<u>8</u>	<u>8</u>
<u>CLAY, Brown</u>	<u>0</u>	<u>8</u>	<u>27</u>	<u>19</u>
<u>SAND, Brown quick</u>	<u>0</u>	<u>27</u>	<u>31</u>	<u>4</u>
<u>CLAY, GRAY</u>	<u>0</u>	<u>31</u>	<u>33</u>	<u>2</u>
<u>SAND, GRAY quick</u>	<u>0</u>	<u>33</u>	<u>—</u>	<u>—</u>
<u>CASING WAS PULLED AND SEALED WITH NEAT CEMENT TO 25'</u>				

8. WELL CONSTRUCTION 33

Diameter _____ inches Total depth NONE feet

Casing record NONE

Weight per foot _____ Thickness _____

Diameter	From	To
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

Surface seal: Yes No Type _____

Depth of seal _____ feet

Gravel packed: Yes No

Gravel packed from _____ feet to _____ feet

Perforations:

Type perforation NONE

Size perforation _____

From _____ feet to _____ feet

Date started 5-4 1987
Date completed 5-5 1987

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
	<u>NONE</u>		

BAILER TEST

G.P.M.	Draw down	feet	hours

9. WATER LEVEL

Static water level NONE feet below land surface

Flow _____ G.P.M. _____ P.S.I.

Water temperature _____ °F Quality _____

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 0023987

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 Gerald W. Owen By driller performing actual drilling on site or contractor

Date 5-5-87