

OFFICE USE ONLY  
 Log No. 30053  
 Permit No. \_\_\_\_\_  
 Basin 101



WELL DRILLER'S REPORT

Please complete this form in its entirety

NOTICE OF INTENT NO. 10370

PRINT OR TYPE ONLY

1. OWNER Robert AnsoTequi ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS 1256 1205 S Harmon Rd SAME AS OWNER  
Fallon, NV 89406  
 2. LOCATION SW 1/4 SW 1/4 Sec 36 T 19N R 29 E Churchill County \_\_\_\_\_  
 PERMIT NO. 7-932-08 Issued by Water Resources Parcel No. \_\_\_\_\_ Subdivision Name \_\_\_\_\_

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>Overburden</u>		<u>0</u>	<u>10</u>	<u>10</u>
<u>Clay, Brown</u>		<u>10</u>	<u>20</u>	<u>10</u>
<u>Fine, sand,</u>				
<u>Yellowish,</u>	<u>10</u>	<u>20</u>	<u>23</u>	<u>3</u>
<u>Water had strong salt content. This area is bad at lower depth for good water.</u>				
<u>"Note" FROM CASING WAS REMOVED FROM WELL AND SERVED WITH CEMENT FROM BOTTOM TO GROUND SURFACE.</u>				

8. WELL CONSTRUCTION

Diameter \_\_\_\_\_ inches Total depth \_\_\_\_\_ feet  
 \_\_\_\_\_ inches  
 \_\_\_\_\_ inches

Casing record \_\_\_\_\_  
 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 \_\_\_\_\_  
 Size perforation \_\_\_\_\_  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Date started 6-22, 19 88  
 Date completed 6-22, 19 88

9. WATER LEVEL  
 Static water level 10 feet below land surface  
 Flow \_\_\_\_\_ G.P.M. P.S.I. \_\_\_\_\_  
 Water temperature \_\_\_\_\_ °F Quality SALT WATER

7. WELL TEST DATA STATE ENGINEERS INC

Pump RPM	G.P.M.	Draw Down	After Hours Pump
		<u>89: 6M</u>	<u>92: 48</u>
		<u>88: 24</u>	<u>88: 48</u>

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  
 Address P.O. Box 883 Fallon, NV 89406  
 Nevada contractor's license number issued by the State Contractor's Board 0023978  
 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 Harold W. Olson  
 By driller performing actual drilling on site or contractor  
 Date 6-22-88

BAILER TEST

G.P.M.	Draw down	feet	hours
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____