WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

Please complete this form in its entirety

OFFICE USE ONLY
Log No. 30215
Permit No.
Basin 8-101

PRINT OR TYPE ONLY

NOTICE OF INTENT NO. 9514

1. OWNER Fallon Paiute-Shoshone Tribes
MAILING ADDRESS P. O. Box 1650
Fallon, Nv 89406

ADDRESS AT WELL LOCATION Corner of Mission & Agency Rds
Stillwater

2. LOCATION SE ¼ SE ¼ Sec. 16 T. 19 N/S R. 30 E. Churchill County

PERMIT NO. 195 (Issued by Water Resources) | 27-001-90157 (Parcel No.) | -- (Subdivision Name)

3. TYPE OF WORK
New Well [XX] Recondition [ ]
Deepen [ ] Other [X] ~~Abandonment~~

4. PROPOSED USE Thermal Gradient
Domestic [ ] Irrigation [ ] Test [X]
Municipal [ ] Industrial [ ] Stock [ ]

5. TYPE WELL
Cable [ ] Rotary [ ]
Other [ ]

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Abandonment:				
Removed 500 feet of				
1½ inch threaded/				
coupled pipe, trip in				
60 feet of 1½ inch				
threaded/coupled pipe				
pump neat cement				
27 sack per 1 yard				
5.5 gallons of water				
per sack from 60 feet				
to ground level				
Total lbs. slurry				
pumped: 7,540 lbs.				

Date started 8/9/ 1988
Date completed 8/9/ 1988

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump

BAILER TEST
G.P.M. ..... Draw down ..... feet ..... hours
G.P.M. ..... Draw down ..... feet ..... hours
G.P.M. ..... Draw down ..... feet ..... hours

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
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet

9. WATER LEVEL
Static water level ..... 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 Aqua Drilling & Well Service, INc. (Contractor)
Address 625 Spice Islands Dr. Suite L Sparks, Nv 89431 (Contractor)
Nevada contractor's license number issued by the State Contractor's Board 15291
Nevada contractor's driller's number issued by the Division of Water Resources 1132
Nevada driller's license number issued by the Division of Water Resources, the on site driller 1509
Signed Roger M Thrall (By driller performing actual drilling on site or contractor)
Date Roger M. Thrall 8/15/88

(Rev. 11-85) USE ADDITIONAL SHEETS IF NECESSARY (O)-627