

OFFICE USE ONLY
 Log No. 30697
 Permit No. _____
 Basin 8-101

WELL DRILLER'S REPORT

Please complete this form in its entirety

PRINT OR TYPE ONLY

NOTICE OF INTENT NO. 12152

1. OWNER LAURA HUGHES ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 3411 CASEY ROAD 4801 SOLIAS RD
FALLON, NV 89406
 2. LOCATION NW 1/4 NW 1/4 Sec 15 T 18 N 28 E C. HURCHILL County _____
 PERMIT NO. _____ Issued by Water Resources _____ Parcel No. _____ Subdivision Name _____

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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
SAND & GRAVEL		0	16	16
CLAY		16	25	9
SAND	X	25	32	7
CLAY		32	34	2
BLACK SAND & SILT	X	34	51	17
CLAY		51	54	3
COARSE SAND & GRAVEL	X	54	64	10
CLAY		64	-	

8. WELL CONSTRUCTION

Diameter 6 inches Total depth 64 feet
 _____ inches
 _____ inches
 Casing record 6 5/8 x 64
 Weight per foot 12.9 Thickness 188
 Diameter From To
6 inches 0 feet 64 feet
 _____ inches _____ feet _____ feet
 Surface seal: Yes No Type CEMENT
 Depth of seal 50 feet
 Gravel packed: Yes No
 Gravel packed from _____ feet to _____ feet

Perforations:
 Type perforation MACHINE SLIT
 Size perforation 3/32 x 3
 From 54 feet to 62 feet
 From _____ feet to _____ feet

Date started 12/1 1988
 Date completed 12/1 1988

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
<u>AIR BLOWN @</u>	<u>50</u>	<u>6 PM</u>	

BAILER TEST

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

9. WATER LEVEL

Static water level 11 feet below land surface
 Flow _____ G.P.M. _____ P.S.I.
 Water temperature 61 °F Quality UNKNOWN

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name WELSCO CORP Contractor
 Address P.O. BOX 888 FALLON, NV 89406 Contractor
 Nevada contractor's license number issued by the State Contractor's Board 11752
 Nevada contractor's driller's number issued by the Division of Water Resources 772
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 765 1562
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 12-5-88

RECEIVED
 STATE ENGINEERS OFFICE
 '88 DEC -7 A9 10