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**

31251
Log No.
Permit No.
Basin 8-101

**PRINT OR TYPE ONLY**

NOTICE OF INTENT NO. 12235

1. OWNER D. LAFAYETTE
MAILING ADDRESS 475 S LAVERNE
FALLON, NV 89406
ADDRESS AT WELL LOCATION ALCORN ROAD
FALLON, NV 89406
2. LOCATION NE ¼ NE ¼ Sec. 32 T. 19 N/S R. 28 E 28 CHURCHILL County
PERMIT NO. 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 | Thickness |
|---|---|---|---|---|
| SANDY CLAY | | 0 | 3 | 3 |
| CLAY | | 3 | 7 | 4 |
| SAND | X | 7 | 13 | 6 |
| CLAY | | 13 | 18 | 5 |
| SAND | X | 18 | 27 | 8 |
| CLAY | | 27 | 29 | 2 |
| GRAY SAND & SILT | | 29 | 53 | 24 |
| CLAY | | 53 | 55 | 2 |
| GRAVEL | X | 55 | 69 | 14 |

'89 MAR 22 A9:41
RECEIVED
STATE ENGINEERS OFFICE

Date started MARCH 19, 1989
Date completed MARCH 19, 1989

7. WELL TEST DATA

| Pump RPM | G.P.M. | Draw Down | After Hours Pump |
|---|---|---|---|
| | | | |
| ~~AIR BLOWN~~ | ~~@ 45 GPM~~ | | |

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 6 inches Total depth 69 feet
..... inches
..... inches
Casing record 6 5/8 X 69
Weight per foot 12.9 Thickness .188

| Diameter | From | To |
|---|---|---|
| 6 inches | 0 feet | 69 feet |
| inches | feet | feet |
| inches | feet | feet |
| inches | feet | feet |
| inches | feet | 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 SLOT
Size perforation 3/32 X 3
From .061 feet to 67 feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet
From ..... feet to ..... feet

9. WATER LEVEL
Static water level 7 feet below land surface
Flow ..... G.P.M. ..... P.S.I.
Water temperature 60 °F Quality UNKWN

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 1562
Signed ..... (By driller performing actual drilling on site or contractor)
Date MARCH 20, 1989

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