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WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 21327

1. OWNER C. T. Pierson Construction ADDRESS AT WELL LOCATION 2626 Lenore Dr.  
 MAILING ADDRESS P.O. Box 590 Fallon, Nev. 89407  
 2. LOCATION NW 1/4 NE 1/4 Sec. 16 T 19 N/S R. 29 E Churchill County  
 PERMIT NO. NW SE 07-391-41 Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Abandon  Other.....  
 4. PROPOSED USE  
 Domestic  Irrigation  Test  
 Municipal/Industrial  Monitor  Stock  
 5. WELL TYPE  
 Cable  Rotary  RVC  
 Air  Other.....

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Sand		0	5	5
Brown Clay		5	12	7
Brown Sand		12	25	13
Fine Green Sand		25	27	2
Black & Green Coarse Sand		27	29	2
Fine Green Sand		29	32	3
Black Clay		32	48	16
Black Coarse Sand		48	78	30
Greenish Sand		78	97	19
Fine Brown Sand		97	110	13
Brown Clay		110	115	5
Coarse Sand	X	115	134	19
Brown Clay		134	135	1

UTM E 0351151  
 N 4374732 NAD27

'92 AUG 24 P2:11  
 RECEIVED  
 STATE ENGINEERS OFFICE

8. WELL CONSTRUCTION  
 Depth Drilled 135 Feet Depth Cased 135 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 10 Inches To 135 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6-5/8	12.92	.188	0	135

Perforations:  
 Type perforation Mill Cut  
 Size perforation 1/8"  
 From 131 feet to 134 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 50ft.  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From 50 feet to 135 feet

9. WATER LEVEL  
 Static water level 23 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature Cool °F Quality Unknown

Date started August 18, 1992  
 Date completed August 18, 1992

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift		
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name PARSONS DRILLING, INC. Contractor  
 Address P.O. BOX 1265 Contractor  
FALLON, NEVADA 89407-1265  
 Nevada contractor's license number issued by the State Contractor's Board 29064  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1715  
 Signed Doug Parsons  
 By driller performing actual drilling on site or contractor  
 Date August 18, 1992