

OFFICE USE ONLY  
 Log No. 41303  
 Permit No. 1  
 Basin 01

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

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. 22549

1. OWNER Justin Schnider ADDRESS AT WELL LOCATION 2040 Blues Ct.  
 MAILING ADDRESS 3106 Bottom Rd. Fallon, NV 89406  
 2. LOCATION SE 1/4 NE 1/4 Sec. 23 T. 19 N. XX R. 28 E. Churchill County  
 PERMIT NO. 008-251-89 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	9	9
Brown Clay		9	15	6
Brown Fine Sand		15	18	3
Brown Coarse Sand		18	39	21
Fine Green Sand		39	43	4
Black & White Coarse Sand		43	48	5
Fine Green & Black Sand		48	58	10
Black & Green Coarse Sand		58	63	5
Fine Gray Sand		63	76	13
Black & Green Coarse Sand		76	79	3
Brown Clay		79	81	2
Brown Fine Sand		81	84	3
Brown Coarse Sand	X	84	99	15

93 JUL-6 21 51  
STATE ENGINEER

8. WELL CONSTRUCTION  
 Depth Drilled 99 Feet Depth Cased 99 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 0 To 99  
10 Inches 0 Feet 99 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.92	.188	0	99

Perforations:  
 Type perforation Mill Cut  
 Size perforation 1/8"  
 From 95 feet to 98 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 50  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From 50 feet to 99 feet

9. WATER LEVEL  
 Static water level 11' 9" feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature cool °F Quality unknown

Date started June 18, 19 93  
 Date completed June 18, 19 93

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  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, NV 89407-1265  
 Nevada contractor's license number 29064 issued by the State Contractor's Board.  
 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 July 1, 1993