

OFFICE USE ONLY
 Log No. 42121
 Permit No. 1
 Basin PS-076

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. 24003

1. OWNER L. Gleason ADDRESS AT WELL LOCATION 970 Westerland
 MAILING ADDRESS 970 Westerland
FERNLEY, NV 89408

2. LOCATION SW 1/4 NE 1/4 Sec. 14 T. 20 N/S R 24 E 6400 County
 PERMIT NO. 2110304 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		10	18	18
Clay		18	40	22
Silt	X	42	46	4
Clay		46	88	42
Sand	X	88	127	39

8. WELL CONSTRUCTION
 Depth Drilled 127 Feet Depth Cased 127 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
10	0	50		
6	50	127		

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 7/8	12.9	.188	1	127

Perforations:
 Type perforation: Machine Slot
 Size perforation: 200

From 96 feet to 127 feet

Surface Seal: Yes No Seal Type: Neat Cement
 Depth of Seal: _____ Cement Grout
 Placement Method: Pumped Poured Concrete Grout

Gravel Packed: Yes No

9. WATER LEVEL
 Static water level 38 feet below land surface
 Artesian flow _____ G.P.M. P.S.I.
 Water temperature _____ °F Quality _____

Date started 7-6-93 19____
 Date completed 7-6-93 19____

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
15		1

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Welsco Contractor
 Address Box 888 Contractor
Fallon

Nevada contractor's license number issued by the State Contractor's Board 11752
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 772

Signed [Signature]
 Date _____

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