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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. 23443

1. OWNER Skips Mini Market/B&B Station ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 4901 Reno Hwy 4901 Reno Hwy
SW Fallon, NV 89407
 2. LOCATION SE 1/4 NW 1/4 2828 T. 19 N. X R. 28 E. Churchill County
 PERMIT NO. 2581 Parcel No. 8-473-04 Subdivision Name _____
Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED New Well Replace Recondition Deepen Abandon Other _____
 4. PROPOSED USE Domestic Municipal/Industrial Irrigation Monitor Test Stock

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Brown Sand		0	10	10
Fine Brown Sand		10	17	7
Brown Clay		17	24	7
Coarse & Fine Brown Sand		24	32	8
Brown Coarse Sand		32	38	6
Fine Brown Sand		38	42	4
Fine Green Sand		42	54	12
Coarse Grey Sand		54	78	24
Brown Sandy Clay		78	79	1
Brown Coarse Sand	X	79	98	19

8. WELL CONSTRUCTION
 Depth Drilled 98 Feet Depth Cased 98 Feet
 HOLE DIAMETER (BIT SIZE)
 From 12 Inches To 0 Feet 98 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8 5/8	16.94	.188	0	93

Perforations:
 Type perforation Well Screen
 Size perforation .035
 From 93 feet to 98 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type: Neat Cement Cement Grout Concrete Grout
 Depth of Seal 50
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 50 feet to 98 feet

9. WATER LEVEL
 Static water level 18' 6" feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cool °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 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 1753
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date Nov. 1, 1993

Date started Oct 31, 19 93
 Date completed Oct 31, 19 93

7. WELL TEST DATA

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