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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. 20343

1. OWNER Bob Hendrix ADDRESS AT WELL LOCATION 649 Sunshine Loop
 MAILING ADDRESS _____
 2. LOCATION SW 1/4 SE 1/4 Sec 6 T 18 N/S R 29 E Churchill County
 PERMIT NO. _____ 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
Brown Sand	✓	0	12	12
Brown Clay		12	16	4
Brown Sand	✓	16	30	14
Black Sand		30	47	17
Black Silt	✓	47	67	20
Grey Sand	✓	67	86	19
Grey Sandy Gravel	✓	86	106	20
Brown Sand	✓	106	115	9

8. WELL CONSTRUCTION
 Depth Drilled 115 Feet Depth Cased 115 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 Inches To 50 Feet
6 Inches 50 Feet 115 Feet
 _____ Inches _____ Feet _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>12.9</u>	<u>.188</u>	<u>71</u>	<u>115</u>

Perforations:
 Type perforation Machine Slot
 Size perforation 1/8"
 From _____ feet to _____ feet
 From 107 feet to 112 feet
 From _____ feet to _____ feet
 From _____ feet to _____ 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 _____ feet to _____ feet

9. WATER LEVEL
 Static water level 12-1 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name J.W. Biffle - Welco Contractor
 Address Box 888 Contractor
Follow Me
 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 J.W. Biffle
 By driller performing actual drilling on site or contractor
 Date MAY 8-94

Date started MAY 8 1994
 Date completed MAY 8 1994

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>30</u>		<u>1</u>

'94 JUN 16 PM 1:34
 STATE ENGINEER'S OFFICE