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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. 25842

1. OWNER Gary Hutchings ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS 710 W. Williams Avenue 210 Classic Way  
Fallon, NV 89406 Fallon, NV 89406  
 2. LOCATION NE 1/4 NE 1/4 Sec. 29 T. 19 N. R. 28 E. Churchill County  
 PERMIT NO. Portion of 008-531-09 Parcel No. \_\_\_\_\_ Subdivision Name \_\_\_\_\_  
 Issued by Water Resources \_\_\_\_\_

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	10	10
Brown Clay		10	13	3
Brown Sand		13	29	16
Brown Clay		29	33	4
Brown Sand		33	41	8
Brown Clay		41	47	6
Gray Sand		47	70	23
Brownish Gray Clay		70	78	8
Brownish Sand	X	78	96	18

8. WELL CONSTRUCTION  
 Depth Drilled 96 Feet Depth Cased 96 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 10 Inches To 96 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	91

Perforations:  
 Type perforation Well Screen  
 Size perforation .035  
 From 91 feet to 96 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 50 feet to 96 feet

9. WATER LEVEL  
 Static water level 22' 3" feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature cool °F Quality unknown

Date started 7-19, 19 94  
 Date completed 7-19, 19 94

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			

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 issued by the State Contractor's Board 29064  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1753  
 Signed Wayne Kern  
 By driller performing actual drilling on site or contractor  
 Date 8-10-94