

Log No. **48086**
 Permit No. _____
 Basin. **101**

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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. **28703**

1. OWNER **Alice Miller** ADDRESS AT WELL LOCATION **4303 Margoree**
Hawthorn NV 89415 **Fallon NV 89406**
 2. LOCATION **NW 1/4 SE 1/4 Sec 16 T 18 N/S R 28 E Churchill** County
 PERMIT NO. **006-434-48** 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 Sands		0	19	19
Brown Clay		19	20	1
Brown Sands		20	32	12
Grey Sands		32	47	15
Black silt clay		47	56	9
Grey Sands		56	64	8
Grey clay		64	65	1
Brown Sands	65	65	73	8

8. WELL CONSTRUCTION
 Depth Drilled **73** Feet Depth Cased **73** Feet
 HOLE DIAMETER (BIT SIZE)
 From **6 7/8** Inches To **7 3/4** Feet
 From **1 0** Inches To **7 3/4** Feet
 From _____ Inches To _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6	12.8	5/8	0	73

Perforations:
 Type perforation **Factory**
 Size perforation **10023 .060**
 From **6.8** feet to **72** feet
 From _____ feet to _____ feet

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

9. WATER LEVEL
 Static water level **15 feet 6 inch** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **cool** °F Quality **ok**

Date started **March 20**, 19 **95**
 Date completed **March 20**, 19 **95**

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 checked="" type="checkbox"/> Air Lift	20		1/2

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name **WELSCO CORP** Contractor
 Address **335 N Broadway** Contractor
Fallon NV 89406
 Nevada contractor's license number **11752**
 issued by the State Contractor's Board
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **772**
 Signed **Jesse Mancurran**
 By driller performing actual drilling on site or contractor
 Date **3-20-95**