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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. 26349

1. OWNER Alkins Const ADDRESS AT WELL LOCATION 2595 Lenore Dr
 MAILING ADDRESS _____
 2. LOCATION NE 1/4 SW 1/4 Sec. 16 T 19 N/S R 29 E Churchill County
 PERMIT NO. 007-391-55 Subdivision Name _____
Issued by Water Resources Parcel No.

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	✓	0	39	39
Gray Sand	✓	39	47	8
Black silt	✓	47	67	20
Black Sand	✓	67	88	21
Gray Sand	✓	88	92	4
Brown Sand	✓	92	100	100

UTM E 0350999
 N 4374785
 NAD27

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 STATE ENGINEERS OFFICE

8. WELL CONSTRUCTION
 Depth Drilled 100 Feet Depth Cased 100 Feet
 HOLE DIAMETER (BIT SIZE)
 From 0 To 50
6 Inches 50 Feet 100 Feet
 _____ Inches _____ Feet _____ 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>1</u>	<u>100</u>

Perforations:
 Type perforation machine slot
 Size perforation .080
 From _____ feet to _____ feet
 From 92 feet to 93 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 9-7 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 Welsco Contractor
 Address Box 888 Fallon Contractor
 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 Wesley J. [Signature]
 By driller performing actual drilling on site or contractor
 Date June 29-94

Date started MAY 17, 1994
 Date completed MAY 17, 1994

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	<u>25</u>		<u>1</u>