WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

OFFICE USE ONLY
Log No. 49049
Permit No.
Basin 8-101

NOTICE OF INTENT NO. 23440

1. OWNER CHURCHILL CNTY. ADMIN. BLD.
MAILING ADDRESS 190 W. FIRST ST. FALLON, NV.
ADDRESS AT WELL LOCATION SAME

2. LOCATION B ¼ B ¼ Sec. 31 T. 19 N/S R. 29 E. CHURCHILL County
PERMIT NO. M/O 895 (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 AUGER

6. LITHOLOGIC LOG MW# 1

Material	Water Strata	From	To	Thickness
SAND S		0'	5'	
SILTY SANDS	10.5'	5'	20'	

8. WELL CONSTRUCTION
Depth Drilled 20' Feet Depth Cased 20' Feet

HOLE DIAMETER (BIT SIZE)

		From	To
10" Inches		0' Feet	20' Feet
Inches		Feet	Feet
Inches		Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4"	40	PVC	0'	20'

Perforations:
Type perforation FACTORY
Size perforation .020
From 5' feet to 20' feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

Surface Seal: ☑ Yes ☐ No
Depth of Seal 4'
Placement Method: ☐ Pumped ☑ Poured
Seal Type: ☑ Neat Cement ☐ Cement Grout ☐ Concrete Grout

Gravel Packed: ☑ Yes ☐ No
From 4' feet to 20' feet

9. WATER LEVEL
Static water level 10.5' feet below land surface
Artesian flow NO G.P.M. N/A P.S.I.
Water temperature COLD °F Quality N/A

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Anderson Drilling Contractor
Address 1635 BOFORD RD. Contractor
RENO NV. 89509
Nevada contractor's license number issued by the State Contractor's Board 34525
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1028
Signed By driller performing actual drilling on site or contractor
Date 2/11/95

Date started 1/26, 1995
Date completed 1/26, 1995

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

95 MAY -5 AM 11:10
STATE ENGINEER'S OFFICE

(Rev. 3-91) USE ADDITIONAL SHEETS IF NECESSARY (O)-627