

OFFICE USE ONLY
 Log No. 49530
 Permit No. 101
 Basin 101

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

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. 28851

1. OWNER Rich Getto ADDRESS AT WELL LOCATION 1970 Ridge Rd. Fallon
 MAILING ADDRESS _____

2. LOCATION SE 1/4 NW 1/4 Sec 24 T 19 N/S R. 28 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	16	16
Brown clay		16	19	3
Grey sand	X	19	40	21
Black silt		40	66	26
Grey sands		66	80	14
Grey clay	X	80	82	2
Brown sands	X	82	93	11

8. WELL CONSTRUCTION

Depth Drilled 93 Feet Depth Cased 93 Feet

HOLE DIAMETER (BIT SIZE)

	From	To	
<u>8 3/4</u> Inches	<u>0</u> Feet	<u>50</u> Feet	
<u>6 1/8</u> Inches	<u>50</u> Feet	<u>93</u> 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>1/8</u>	<u>1</u>	<u>93</u>

Perforations:
 Type perforation Machine Cut
 Size perforation 2 3/8 - 2 7/8
 From 86 feet to 91 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 11.9 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cool °F Quality OK

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name WELBO CORP Contractor
 Address 335 N Broadway 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 1996
 Signed John Markiewicz
 By driller performing actual drilling on site or contractor
 Date 8-21-95

Date started 8-21, 19 95
 Date completed 8-21, 19 95

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>

REMOVED
 10 SEP 29 1995
 STATE ENGINEERING OFFICE