

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 N 1998
IN FULL SOUTH OF BELL CO.

1. OWNER BERNARDINA PARRIS ADDRESS AT WELL LOCATION _____
MAILING ADDRESS PO BOX 313
WENDEN, NEVADA 89093
2. LOCATION SE 1/4 NW 1/4 Sec 1 T 38N R 38E County WINDSOR
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	Thickness
SANDY SOIL	NO	0	30	30
SANDSTONE & SAND	NO	30	41	11
COARSE SAND & SOME CLAY	NO	41	100	59
CLAY SOME COB SAND	NO	100	104	4
COARSE SAND	NO	104	200	96
SANDY SOIL CLAY SOME COB SAND	NO	200	202	2
COARSE SAND, SOME MUD CLAY	YES	202	222	20
COARSE SAND	YES	222	400	178
COARSE SAND, SANDY CLAY	YES	400	406	6
COARSE SAND	YES	406	502	96
COARSE SAND, SANDY CLAY	YES	502	504	2
SANDY SOIL CLAY WITH SAND	YES	504	507	3
SANDY MUD CLAY	NO	507	508	1
CLAY WITH SAND	NO	508	509	1
CLAY	NO	509	510	1
SUBSTRATE SAND	NO	510	512	2
BROWN CLAY	NO	512	513	1

8. WELL CONSTRUCTION
Depth Drilled 600 Feet Depth Cased 600 Feet
HOLE DIAMETER (BIT SIZE)
From _____ To _____
Inches _____ Feet _____
Inches _____ Feet _____
Inches _____ Feet _____

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
12"	42.05	2.50	0	200
12"	42.05	2.50	200	202
12"	42.05	2.50	202	502
16"	42.05	2.50	502	552

Perforations:
Type perforation SCREENED WITH 1/2" SLOTS
Size perforation 1/2" - 6 SLOT SCREEN WELL SCREEN
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
Depth of Seal 30 FT
Placement Method: Pumped Poured
Gravel Packed: Yes No
From 600 FT feet to 30 FT feet

9. WATER LEVEL
Static water level 113 FT feet below land surface
Artesian flow NONE G.P.M. _____ P.S.I. _____
Water temperature 68 °F Quality GOOD

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name FEDE COPE DRILLING CO. INC. Contractor
Address 400 W. CHURCH Contractor
WENDEN, NEVADA 89093
Nevada contractor's license number issued by the State Contractor's Board 1300
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1007
Signed [Signature]
By driller performing actual drilling on site or contractor
Date 5-18-95

Date started 4-29-95, 19____
Date completed 5-18-95, 19____

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			
NOT AVAILABLE			

95 MAY 22 P 3:11
STATE ENGINEERS OFFICE