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. 58560
Permit No.
Basin 101

NOTICE OF INTENT NO. 30037

1. OWNER Gary Hutchings
MAILING ADDRESS 4650 Bottom Road
Fallon, NV 89406

ADDRESS AT WELL LOCATION
1405 Melanie Lane, Fallon, NV 89406

2. LOCATION SW 1/4 SE 1/4 Sec. 20 T 19N N/S R 28E E Churchill County
PERMIT NO. _____ Issued by Water Resources | 8-191-50 Parcel No. | Subdivision Name

3. WORK PERFORMED
[X] New Well [ ] Replace [ ] Recondition
[ ] Deepen [ ] Abandon [ ] Other _____

4. PROPOSED USE
[X] Domestic [ ] Irrigation [ ] Test
[ ] Municipal/Industrial [ ] Monitor [ ] Stock

5. WELL TYPE
[ ] Cable [X] Rotary [ ] RVC
[ ] Air [ ] Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Brown Sand	--	0	18	18
Brown Clay		18	35	17
Brown Sand	x	35	40	5

RECEIVED
96 OCT 21 PM 2:09
STATE ENGINEERS OFFICE

Date started 9/24/96 , 19__
Date completed 9/24/96 , 19__

7. WELL TEST DATA
TEST METHOD: [ ] Bailer [ ] Pump [X] Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
15		1 hr.

8. WELL CONSTRUCTION
Depth Drilled 40 Feet Depth Cased 40 Feet

HOLE DIAMETER (BIT SIZE)

		From	To
10 Inches		0 Feet	40 Feet
____ Inches		____ Feet	____ Feet
____ Inches		____ Feet	____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.92	.188	0	40

Perforations:
Type perforation Mill Cut
Size perforation 1/8
From 37 feet to 40 feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: [X] Yes [ ] No
Depth of Seal 25
Placement Method: [X] Pumped [ ] Poured
Seal Type: [X] Neat Cement [ ] Cement Grout [ ] Concrete Grout

Gravel Packed: [X] Yes [ ] No
From 25 feet to 40 feet

9. WATER LEVEL
Static water level 9 feet below land surface
Artesian flow ____ G.P.M. ____ P.S.I.
Water temperature Cool °F Quality Unknown

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Parsons Drilling, Inc. (Contractor)
Address P.O. Box 1265 (Contractor)
Fallon, NV 89407-1265

Nevada contractor's license number issued by the State Contractor's Board 29064

Nevada driller's license number issued by the Division of Water Resources the on-site driller 1753

Signed [signature]
By driller performing actual drilling on-site or contractor

Date 10-14-96