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

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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. 63052
Permit No.
Basin 101

NOTICE OF INTENT NO. 84394

1. OWNER Robert Fowkes
MAILING ADDRESS 1060 Lazy Heart Lane
Fallon, NV 89406

ADDRESS AT WELL LOCATION
1060 Lazy Heart Lane

2. LOCATION NW 1/4 NE 1/4 Sec. 18 T 18N N/S R 29E E Churchill County
PERMIT NO. _____ Issued by Water Resources | 006-751-46 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	10	10
Brown Clay		10	16	6
Brown Sand		16	19	3
Brown Clay		19	27	8
Brown Sand	X	27	33	6

RECEIVED 96 SEP 10 AM 11:34 STATE ENGINEER'S OFFICE

Date started 8/27/96, 19__
Date completed 8/27/96, 19__

7. WELL TEST DATA

TEST METHOD: [ ] Bailer [ ] Pump [X] Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
18		1 hr.

8. WELL CONSTRUCTION
Depth Drilled 33 Feet Depth Cased 33 Feet

HOLE DIAMETER (BIT SIZE)

		From	To
10 Inches		0 Feet	33 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	33

Perforations:
Type perforation Mill Cut
Size perforation 1/8
From 30 feet to 33 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 33 feet

9. WATER LEVEL
Static water level 2.6 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 Wayne Parsons
By driller performing actual drilling on-site or contractor

Date 9-5-96