

STATE OF NEVADA
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY
 Log No. 63953
 Permit No. _____
 Basin 721

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. 78219

1. OWNER RICHARD GETTO CONSTRUCTION ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 1794 TUMBLEWEED DRIVE 940 DRIFTWOOD
FALLON, NV 89406

2. LOCATION SW 1/4 SE 1/4 Sec. 29 T 19 N/S R 28 E CHURCHILL County _____
 PERMIT NO. _____
 Issued by Water Resources _____ Parcel No. _____ Subdivision Name _____

3. WORK PERFORMED 4. PROPOSED USE 5. WELL TYPE
 New Well Replace Recondition Domestic Irrigation Test Cable Rotary RVC
 Deepen Abandon Other Municipal/Industrial Monitor Stock Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
BROWN SAND		0	20	20
BROWN CLAY		20	22	2
GREY SAND		22	50	28
BLACK SILT		50	60	10
GREY SAND		60	70	10
BROWN CLAY		70	71	1
BROWN SAND	X	71	83	12

8. WELL CONSTRUCTION
 Depth Drilled 83 Feet Depth Cased 83 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
10 3/4 Inches 1 Feet 50 Feet
6 1/4 Inches 50 Feet 83 Feet
 Inches Feet 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>.188</u>	<u>+01</u>	<u>83</u>

Perforations:
 Type perforation MACHINE SLIT
 Size perforation .090
 From 75 feet to 81 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 50 FT Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 10.5 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 62 °F Quality UNTESTED

Date started 4/28/96, 19____
 Date completed 4/28/96, 19____

7. WELL TEST DATA

TEST METHOD:	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>40</u>	<u>1 hr.</u>
G.P.M.		

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Welsco Drilling Corp. Contractor _____
 Address P. O. BOX 888 Contractor _____
FALLON, NV 89407
 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 Jesus Marin
 By driller performing actual drilling on-site or contractor
 Date 4-28-96