

STATE OF NEVADA
 DIVISION OF WATER RESOURCES
 WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 3971
 Permit No. _____
 Basin 101
34323
 NOTICE OF INTENT NO _____

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

1. OWNER **R GETTO CONSTRUCTION** ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS **1794 TUMBLEWEED ROAD** **977 DRIFTWOOD**
FALLON, NV 89406
 2. LOCATION **SW** 1/4 **SW** 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 New Well Replace Recondition Deepen Abandon Other _____
 4. PROPOSED USE Domestic Municipal/Industrial Irrigation Monitor Test Stock
 5. WELL TYPE Cable Rotary RVC Air Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
BROWN SAND		0	16	16
BROWN CLAY		16	20	4
BROWN SAND		20	30	10
GREY SAND		30	60	30
GREY CLAY		60	63	3
BROWN SILT		63	67	4
BROWN CLAY		67	70	3
BROWN SAND	X	70	87	17

8. WELL CONSTRUCTION
 Depth Drilled **87** Feet Depth Cased **87** Feet
 HOLE DIAMETER (BIT SIZE)
 From To
10 3/4 Inches **0** Feet **50** Feet
6 1/8 Inches **50** Feet **87** Feet
 Casing Schedule

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.9	.188	+1	87

Perforations:
 Type perforation **MACHINE SLIT**
 Size perforation **.080**
 From **80** feet to **85** 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 **50**
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level **8..58** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **COOL** °F Quality **UNTESTED**

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 _____
 Date **8-26-96**
 By driller performing actual drilling on-site or contractor

Date started **8/19/96**, 19____
 Date completed **8/19/96**, 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 checked="" type="checkbox"/> Air Lift	25		1 hr.

RECEIVED
 96 SEP -3 PM 2:12
 STATE ENGINEERS OFFICE