

OFFICE USE ONLY
 Log No. 64056
 Permit No. _____
 Basin 101

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. 28495
1595 Getto Ct.

1. OWNER DAVE AKINS 2160 RICE RD. ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS _____

2. LOCATION SW 1/4 SE 1/4 Sec. 19 T. 19 N/S R. 29 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 Irrigation Test
 Municipal/Industrial Monitor Stock
 5. WELL TYPE
 Cable Rotary RVC
 Air Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Brown sand		0	20	20
Brown clay		20	25	5
Grey sands		25	40	15
Black silt		40	60	20
Grey sands		60	75	15
Brown clay		75	80	5
Brown sands	X	80	95	15

8. WELL CONSTRUCTION
 Depth Drilled 95 Feet Depth Cased 95 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
10 3/4 Inches 0 Feet 50 Feet
6 1/8 Inches 50 Feet 95 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>1/8</u>	<u>+1</u>	<u>95</u>

 Perforations:
 Type perforation MACHINE CUT
 Size perforation .080
 From 88 feet to 93 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 50 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From _____ feet to _____ feet
 9. WATER LEVEL
 Static water level 9' 8" feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 60X °F Quality OX

Date started 3-21 1996
 Date completed 3-21 1996

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift		
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>25</u>		<u>1</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name WELSCO CORP Contractor
 Address 335 N Broadway Contractor
Callon, NV
 Nevada contractor's license number 11757
 issued by the State Contractor's Board.
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1996
 Signed Jesus Manriquez
 By driller performing actual drilling on site or contractor
 Date 3-21-96