

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

OFFICE USE ONLY
 Log No. 65104
 Permit No. _____
 Basin 101

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

NOTICE OF INTENT NO 34682

OWNER GNS CONSTRUCTION ADDRESS AT WELL LOCATION 5110 CALEB
 MAILING ADDRESS 4240 RENO HWY
FALLON, NV 89406

2. LOCATION SW 1/4 SE 1/4 Sec. 20 T 20N N/S R 28E E CHURCHILL County
 PERMIT NO. NA Issued by Water Resources 08-191-78 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 Air Rotary RVC Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
BROWN SAND		0	19	19
BROWN CLAY		19	21	2
BROWN SAND		21	30	9
GREY SAND		30	35	5
BROWN CLAY		35	39	4
BROWN SILT		39	43	4
BROWN SAND	X	43	55	12

8. WELL CONSTRUCTION
 Depth Drilled 55 Feet Depth Cased 55 Feet
 HOLE DIAMETER (BIT SIZE)
 From _____ To _____
10 3/4 Inches 0 Feet 45 Feet
6 1/8 Inches 45 Feet 55 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.9	.188	+1	55

Perforations:
 Type perforation MACHINE SLOT
 Size perforation .080
 From 48 feet to 53 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type: Neat Cement Cement Grout Concrete Grout
 Depth of Seal 45
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 9.3 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 305 E. WILLIAMS AVE. 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 [Signature]
 By driller performing actual drilling on-site or contractor
 Date 11-21-96

Date started 11/26/96, 19____
 Date completed 11/26/96, 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	<u>20</u>	<u>1 hr.</u>	

RECEIVED 11/26/96
 DIVISION OF WATER RESOURCES
 STATE OF NEVADA