

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

OFFICE USE ONLY  
 Log No. 65140  
 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. 34680

1. OWNER PETE STEWART ADDRESS AT WELL LOCATION 5112 RIVERS EDGE  
 MAILING ADDRESS 828 MCLEAN RD  
FALLON, NV 89406

2. LOCATION SW 1/4 SW 1/4 Sec. 2529 T 19N N/S R 28E E CHURCHILL County  
 PERMIT NO. NA Issued by Water Resources Parcel No. 8-492-43 Subdivision Name RIVERS EDGE

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	18	18
BROWN CLAY		18	21	3
BROWN SAND	X	21	32	11
GREY SAND		32	50	28
BLACK SILT		50	63	3
GREY SAND		63	75	12
GREY CLAY		75	80	5
BROWN SAND	X	80	99	19

8. WELL CONSTRUCTION  
 Depth Drilled 99 Feet Depth Cased 99 Feet

HOLE DIAMETER (BIT SIZE)

	From	To		
<u>10 3/4</u> Inches	<u>0</u> Feet	<u>50</u> Feet		
<u>6 1/8</u> Inches	<u>50</u> Feet	<u>99</u> 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>+1</u>	<u>99</u>

Perforations:  
 Type perforation MACHINE SLIT  
 Size perforation .080

From	feet to		feet
<u>92</u>	<u>97</u>		
_____	_____		
_____	_____		
_____	_____		
_____	_____		

Surface Seal:  Yes  No Seal Type:  Neat Cement  
 Depth of Seal 50  Cement Grout  
 Placement Method:  Pumped  Concrete Grout  
 Poured

Gravel Packed:  Yes  No  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

9. WATER LEVEL  
 Static water level 12.3 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 12-1-96

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>25</u>		<u>1 hr.</u>
_____		_____
_____		_____

Date started 11/29/96, 19\_\_\_\_  
 Date completed 11/29/96, 19\_\_\_\_

305 E WILLIAMS AVE  
 FALLON NV 89407  
 WELSCO DRILLING CORP.