

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

OFFICE USE ONLY
 Log No. 66653
 Permit No. 101
 Basin 101
 NOTICE OF INTENT NO. 28223

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 **AKINS CONSTRUCTION** ADDRESS AT WELL LOCATION **1055 GOLDEN PARKWAY**
 MAILING ADDRESS **2160 RICE ROAD**
FALLON, NV 89406
 2. LOCATION **SE** 1/4 **SW** 1/4 Sec. **19** T **19N** N/S R **29E** 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 Air Cable Rotary RVC Other _____

6. **LITHOLOGIC LOG**

Material	Water Strata	From	To	Thickness
BROWN SAND		0	15	15
BROWN CLAY		15	21	6
BROWN SAND		21	30	9
GREY SANDS		30	50	20
GREY CLAY		50	52	2
BLACK SILT \ CLAY		52	70	18
GREY SAND		70	75	5
GREY SAND		75	76	1
BROWN SAND	X	76	87	11

8. WELL CONSTRUCTION
 Depth Drilled **87** Feet Depth Cased **87** Feet
 HOLE DIAMETER (BIT SIZE)
 10" Inches **0** Feet **50** Feet
 6" 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 **3/32**
 From **78** feet to **84** feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type: Neat Cement
 Depth of Seal **50** Cement Grout
 Placement Method: Pumped Poured Concrete Grout
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level **9** 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 _____ By driller performing actual drilling on-site or contractor
 Date _____

Date started **6/6/96**, 19____
 Date completed **6/6/96**, 19____

7. WELL TEST DATA

TEST METHOD:	Bailer	Pump	Air Lift
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
20		1 hr.	