

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

OFFICE USE ONLY  
 Log No. 68298  
 Permit No. \_\_\_\_\_  
 Basin 101  
 NOTICE OF INTENT NO. 36391

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 910 DRIFTWOOD  
 MAILING ADDRESS 1794 TUMBLEWEED  
FALLON, NV 89406

2. LOCATION SE 1/4 SE 1/4 Sec. 29 T 19 N/S R 28 E CHURCHILL County  
 PERMIT NO. 08-652-51 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	15	15
BROWN CLAY		15	18	3
BROWN SAND		18	35	17
GREY SAND		35	50	15
BLACK SILT/SAND		50	60	10
GREY SAND		60	70	10
GREY CLAY		70	75	5
BROWN SAND	X	75	87	12

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  
 Inches Feet 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>.188</u>	<u>+1</u>	<u>87</u>

Perforations:  
 Type perforation MACHINE SLOT  
 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 (Bonsca)  
 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 16.4 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 Aug-7-97

Date started 7/27/97, 19\_\_\_\_  
 Date completed 7/27/97, 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>25</u>		<u>1 hr.</u>

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