

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

OFFICE USE ONLY
 Log No. 69107
 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. 36738

1. OWNER R & B Development ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS P.O. Box 1848 1925 Sprigg Lane, Fallon, NV 89406
Fallon, NV 89505

2. LOCATION SW 1/4 NE 1/4 Sec. 19 T 19N N/S R-26E E Churchill County
 PERMIT NO. 8-132-78 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
Sand		0	12	12
Tan Clay		12	26	14
Sand COarse		26	42	16
Clay		42	43	1
Coarse Sand		43	62	19
Gray Clay		62	63	1
Gray Sand		63	88	25
tan Clay		88	90	2
Sand & Gravel	X	90	100	10

RECEIVED
 97 AUG - 9 AM 11:22
 STATE ENGINEERS OFFICE

8. WELL CONSTRUCTION
 Depth Drilled 100 Feet Depth Cased 100 Feet

HOLE DIAMETER (BIT SIZE)
 From _____ To _____
10 Inches 0 Feet 100 Feet
 _____ Inches _____ Feet _____ 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>12.92</u>	<u>.188</u>	<u>0</u>	<u>100</u>

Perforations:
 Type perforation Mill Cut
 Size perforation 1/8 x 3'

From <u>97</u>	feet to <u>100</u>	feet
From _____	feet to _____	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 50 feet to 100 feet

9. WATER LEVEL
 Static water level 4.2 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature Cool °F Quality Unknown

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Parsons Drilling, Inc. Contractor
 Address P.O. Box 1265 Contractor
Fallon, NV 89407-1265
 Nevada contractor's license number issued by the State Contractor's Board 29064
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1696
 Signed Derold Parsons
 By driller performing actual drilling on-site or contractor
 Date 8-1-97

Date started 7/9/97, 19____
 Date completed 7/9/97, 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>20</u>		<u>.5</u>