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WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 36829

1. OWNER **Thayne Fabel** ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS **62 E Stillwater Avenue** **1899 Bafford LN, Fallon, NV 89406**
 Fallon, NV 89406

2. LOCATION **SE** 1/4 **NE** 1/4 Sec. **17** T **19N** N/S R **29E** E **Churchill** County
 PERMIT NO. 007-391-71 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	30	12
Black Clay		30	35	5
Black Sand		35	40	5
Gray Sand		40	52	12
Gray Clay		52	60	8
Gray Sand		60	74	14
Brown Sand		74	77	3
Fine Brown Sand	X	77	105	28

8. WELL CONSTRUCTION
 Depth Drilled 105 Feet Depth Cased 105 Feet

HOLE DIAMETER (BIT SIZE)
 From _____ To _____
10 Inches 0 Feet 105 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.92	.188	0	105

Perforations:
 Type perforation **Mill Cut**
 Size perforation **1/8**
 From 92 feet to 105 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 105 feet

9. WATER LEVEL
 Static water level 8.10 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 **1753**
 Signed W. M. [Signature]
 By driller performing actual drilling on-site or contractor
 Date 12-12-97

Date started 11/6/97, 19____
 Date completed 11/6/97, 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>