



PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

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. 37717

1. OWNER **Giovanetti Construction** ADDRESS AT WELL LOCATION **5721 Riverside Drive, Fallon, NV 89406**
 MAILING ADDRESS **5885 Hooper Place Fallon, NV 89406**

2. LOCATION **SW 1/4 NW 1/4 Sec. 29 T 19N N/S R 28E E Churchill** County
 PERMIT NO. **8-551-37** 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	Thickness
Brown Sand		0	30	30
Brown clay		30	33	3
Brown Sand		33	40	7
Gray Clay		40	43	3
Gray Sand		43	60	17
Gray Clay		60	65	5
Brown Sand		65	83	18
Fine Brown Sand		83	103	20
Gray Clay		103	115	12
Gray Sand		115	120	5
Gray Clay		120	130	10
Brown Clay		130	140	10
Brown Sand	X	140	163	23

8. WELL CONSTRUCTION
 Depth Drilled **163** Feet Depth Cased **163** Feet

HOLE DIAMETER (BIT SIZE)
 From **10** Inches To **0** Feet **163** Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8 5/8	14.92	.188	0	10
6 PVC	3.92	.258	0	163

Perforations:
 Type perforation **Saw Cut**
 Size perforation **1/8**

From **160** feet to **163** feet

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

Gravel Packed: Yes No
 From **100** feet to **163** feet

9. WATER LEVEL
 Static water level **13** 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 *[Signature]*
 By driller performing actual drilling on-site or contractor
 Date **5-11-98**

Date started **4/1/98**, 19____
 Date completed **4/2/98**, 19____

7. WELL TEST DATA

TEST METHOD:	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	G.P.M.	

APPROVED
 5 MAY 19 11:10:20
 STATE ENGINEER OF NV