

STATE OF NEVADA
 DIVISION OF WATER RESOURCES

LOG USE ONLY
 Log No. 7-30
 Permit No. 10
 Basis _____
 NOTICE OF INTENT NO. 37744

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

1. OWNER Don Travis ADDRESS AT WELL LOCATION Moody Lane, Fallon, NV89406
 MAILING ADDRESS P.O. Box 1622
Fallon, NV 89406

2. LOCATION SE 1/4 NW 1/4 Sec. 24 T 19N N/S R 28E E Churchill County
 PERMIT NO. W-498 W-498/64071 008-263-03 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	11	11
Brown Clay		11	14	3
Brown Coarse Sand		14	36	22
Fine Gray Sand		36	47	11
Silty Sand		47	56	9
Fine Green Sand		56	71	15
Black & Green Coarse Sand		71	81	10
Brown Fine Sand		81	83	2
Brown & Red Coarse Sand		83	96	13
Brown Sandy Clay		96	111	15
Brown Coarse Sand		111	120	9
Green Sand		120	141	21
Black Silty Clay		141	163	22
Fine Silty Gray Sand		163	184	21
Black & Green Coarse Sand		184	201	17
Brown Sand		201	217	16
Brown Coarse Sand		217	238	21
Green Clay		238	256	18
Black Silt		256	263	7
Black Coarse Sand		263	271	8
Fine Gray Sand		271	274	3
Black Coarse Sand		274	291	17
Brown Coarse Sand	x	291	295	4
Fine Gray Sand	x	295	320	25

8. WELL CONSTRUCTION
 Depth Drilled 320 Feet Depth Cased 320 Feet

HOLE DIAMETER (BIT SIZE)
 From 20 Inches To 0 Feet 320 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
16	42	.250	0	320

Perforations:
 Type perforation Mill Cut
 Size perforation 1/8
 From 280 feet to 295 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 100 _____ Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From 100 feet to 320 feet

Date started 7/1/98, 19____
 Date completed 7/9/98, 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 type="checkbox"/> Air Lift			

9. WATER LEVEL
 Static water level 31 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 1715
 Signed Douglas Parson
 By driller performing actual drilling on-site or contractor
 Date 7-16-98