WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

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DO NOT WRITE ON BACK

STATE OF NEVADA
DIVISION OF WATER RESOURCES

# WELL DRILLER'S REPORT

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

OFFICE USE ONLY
Log No. 78236
Permit No.
Basin 104

NOTICE OF INTENT NO. 40669

1. OWNER Dream Builders
MAILING ADDRESS
ADDRESS AT WELL LOCATION 390 Schecklee Cut-off

2. LOCATION NE ¼ NE ¼ Sec. 30 T. 19 N/S R. 28 E. Churchill County
PERMIT NO. (Issued by Water Resources) 008 573-16 (Parcel No.) Subdivision Name

3. WORK PERFORMED
[X] New Well [ ] Replace [ ] Recondition
[ ] Deepen [ ] Abandon [ ] Other

4. PROPOSED USE
[X] Domestic [ ] Irrigation [ ] Test
[ ] Municipal/Industrial [ ] Monitor [ ] Stock

5. WELL TYPE
[ ] Cable [X] Rotary [ ] RVC
[ ] Air [ ] Other

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thickness |
|---|---|---|---|---|
| Sand | | 0 | 70 | 70 |
| Clay | | 70 | 80 | 10 |
| Sand | | 80 | 130 | 50 |

8. WELL CONSTRUCTION
Depth Drilled 130 Feet Depth Cased 130 Feet

HOLE DIAMETER (BIT SIZE)

| | | From | To |
|---|---|---|---|
| 12¼ Inches | | 0 Feet | 130 Feet |
| Inches | | Feet | Feet |
| Inches | | Feet | Feet |

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|---|---|---|---|---|
| 6" | 3.2 | 280 | 0 | 130 |
| | | | | |
| | | | | |

Perforations:
Type perforation Slots
Size perforation ⅛ x 3"
From 125 feet to 130 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

Surface Seal: [X] Yes [ ] No
Depth of Seal 100'
Placement Method: [X] Pumped [ ] Poured
Seal Type: [X] Neat Cement [ ] Cement Grout [ ] Concrete Grout

Gravel Packed: [X] Yes [ ] No
From 125 feet to 130 feet

9. WATER LEVEL
Static water level 14 feet below land surface
Artesian flow ~ G.P.M. ~ P.S.I.
Water temperature cold °F Quality good

Date started 7-13, 1999
Date completed 7-14, 1999

7. WELL TEST DATA
TEST METHOD: [ ] Bailer [X] Pump [ ] Air Lift

| G.P.M. | Draw Down (Feet Below Static) | Time (Hours) |
|---|---|---|
| 25 | 8 | 4 |

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name FARRIS DRILLING (Contractor)
Address P O Box 5205 (Contractor)
Fallon NV 89407
Nevada contractor's license number issued by the State Contractor's Board 43145
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2082
Signed (By driller performing actual drilling on site or contractor)
Date 8-1-99

(Rev. 3-91)

USE ADDITIONAL SHEETS IF NECESSARY

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