

STATE OF NEVADA
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY
 Log No. 78420
 Permit No. _____
 Basin 1/11

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. 4784

1. OWNER The Garden ADDRESS AT WELL LOCATION 3525 AUSTIN PARKWAY
 MAILING ADDRESS 2949 Austin Hwy FALLON NV 89406
 2. LOCATION SW 1/4 SW 1/4 Sec. 27 T 19N N/S R 29E E CHURCHILL County
 PERMIT NO. 64505 00761116 Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED New Well Replace Recondition Deepen Abandon Other
 4. PROPOSED USE Domestic Municipal Irrigation Test Stock Monitor Other
 5. WELL TYPE Cable Rotary RVC Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
BROWN CLAY		0	10	10
BROWN SAND		10	15	5
BROWN CLAY		15	25	10
BROWN SAND		25	32	7
BROWN CLAY		32	40	8
GRAY CLAY		40	70	30
GRAY SAND		70	82	12
GRAY CLAY		82	90	8
BROWN SAND	xx	90	110	20
BROWN CLAY		110	138	28
BROWN SAND	xx	138	145	7

8. WELL CONSTRUCTION
 Depth Drilled 145 Feet Depth Cased 145 Feet
 HOLE DIAMETER (BIT SIZE)
 From 14 Inches To 0 Feet
 To 145 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8	14.96	.188	0	10
8 pvc	7.17	.258	10	145

Perforations:
 Type perforation SAW CUT
 Size perforation 1/8
 From _____ feet to _____ feet
 From 109 feet to 114 feet
 From 137 feet to 140 feet
 From _____ feet to _____ feet
 From _____ feet to _____ 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 145 feet

9. WATER LEVEL
 Static water level 12 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 1264 Contractor

Date started 07/28/1999, 19____
 Date completed 07/28/1999, 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>60</u>		<u>1 hr</u>

Fallon, Nv. 89407
 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 Wayne Parsons
 By driller performing actual drilling on-site or contractor
 Date 7/29/99