

STATE OF NEVADA  
 DIVISION OF WATER RESOURCES  
**WELL DRILLER'S REPORT**

OFFICE USE ONLY  
 Log No. 83528  
 Permit No. \_\_\_\_\_  
 Basin 07  
 NOTICE OF INTENT 44830

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

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

1. OWNER SAM & JULIE GILMORE  
 MAILING ADDRESS 1532 RED ROAD  
FALLON, NV 89406

ADDRESS AT WELL LOCATION 3400 YORK LANE

2. LOCATION SW 1/4 NE 1/4 Sec. 28 T 19 N/S R 28 E CHURCHILL County

PERMIT NO. 10-103-16 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
TOP SOIL		0	1	1
BROWN SAND		1	18	17
BROWN CLAY		18	22	4
BROWN SAND		22	30	8
BROWN CLAY		30	34	4
GREY SAND		34	50	16
GREY CLAY		50	55	5
GREY SAND		55	65	10
GREY CLAY		65	67	2
BROWN SAND	X	67	79	12

8. WELL CONSTRUCTION  
 Depth Drilled 79 Feet Depth Cased 79 Feet

HOLE DIAMETER (BIT SIZE)  
 From To  
10 Inches 0 Feet 50 Feet  
6 Inches 50 Feet 79 Feet  
 Inches Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8"	12.9	.188	+2	79

Perforations:  
 Type perforation MACHINE PERF  
 Size perforation .080

From 73 feet to 77 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No  
 Depth of Seal 50  
 Placement Method:  Pumped  Poured  
 Seal Type:  Neat Cement  Cement Grout  Concrete Grout

Gravel Packed:  Yes  No  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

9. WATER LEVEL  
 Static water level 7'4" feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature COOL °F Quality UNTESTED

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name WELSCO CORP. Contractor  
 Address P. O. BOX 888 Contractor  
FALLON, NV 89406  
 Nevada contractor's license number issued by the State Contractor's Board 11752  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1996  
 Signed [Signature]  
 By driller performing actual drilling on-site or contractor  
 Date 2/12/2001

Date started 12/18/2000, 19  
 Date completed 1/20/2001, 19

7. WELL TEST DATA

TEST METHOD:	TEST METHOD:		Time (Hours)
	G.P.M.	Draw Down (Feet Below Static)	
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>20</u>		<u>1 HR</u>

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 STATE ENGINEERING OFFICE