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

PRINT OR TYPE ONLY
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. 83879
Permit No.
Basin 101

NOTICE OF INTENT NO. 45[illegible]

1. OWNER Horizon Homes
MAILING ADDRESS 4315 Reno Hwy
Fallon, NV 89406

ADDRESS AT WELL LOCATION 11765 Fulkerson Road,
Fallon, NV 89406

2. LOCATION SE 1/4 NW 1/4 Sec. 14 T 19N N/S R 27E E Churchill County
PERMIT NO. _____ Issued by Water Resources
7-111-47 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
BrownSand		0	55	55
Brown Clay		55	78	23
Brown Sand	XX	78	101	23
Brown Clay		101	103	2

Date started 04/27/2001 , 19__
Date completed 04/27/2001 , 19__

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

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
20		1hr

8. **WELL CONSTRUCTION**
Depth Drilled 103 Feet Depth Cased 103 Feet

HOLE DIAMETER (BIT SIZE)

		From		To	
10	Inches	0	Feet	103	Feet
	Inches		Feet		Feet
	Inches		Feet		Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.92	.188	0	10
6 PVC	3.92	.258	10	103

Perforations:
Type perforation Saw Cut
Size perforation 1/8
From 97 feet to 100 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 50
Placement Method: [X] Pumped [ ] Poured
Seal Type: [ ] Neat Cement [X] Cement Grout [ ] Concrete Grout

Gravel Packed: [X] Yes [ ] No
From 50 feet to 103 feet

9. **WATER LEVEL**
Static water level 60 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
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 05/09/2001

USE ADDITIONAL SHEETS IF NECESSARY