

STATE OF NEVADA
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY
 Log No. 83885
 Permit No. _____
 Basin 101

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. 40112

1. OWNER Jeff Whitaker ADDRESS AT WELL LOCATION 2355 Sorensen Road,
 MAILING ADDRESS 2295 Sorensen Road Fallon, NV 89406
 2. LOCATION SW 1/4 NW 1/4 Sec. 23 T 18N N/S R 28E E Churchill County
 PERMIT NO. 6-411-15 Parcel No. _____ Subdivision Name _____
 Issued by Water Resources

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
Brown sand		0	8	8
Brown Clay		8	12	4
Brown Sand		12	14	2
Brown Clay		14	15	1
Brown Sand		15	20	5
Brown Clay		20	22	2
Brown Sand		22	29	7
Brown CLay		29	31	2
Gray Clay		31	35	4
Black Clay		35	38	3
Black sand		38	50	12
Black Clay		50	56	6
Black Sand		56	60	4
Black Clay		60	65	5
Black Sand		65	70	5
Black Clay		70	72	2
Black Sand		72	80	8
Gray Clay		80	84	4
Gray Sand		84	90	6
Brownish Sand		90	100	10
Brown Clay		100	119	19
Brown Sand	XX	119	129	10

8. WELL CONSTRUCTION
 Depth Drilled 129 Feet Depth Cased 129 Feet
 HOLE DIAMETER (BIT SIZE)
 From 12 Inches To 129 Feet
 _____ Inches _____ Feet
 _____ Inches _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8	7.17	.258	10	129
8 5/8	14.96	188	0	10

Perforations:
 Type perforation Saw Cut
 Size perforation 1/8
 From 122 feet to 129 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 105 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 105 feet to 129 feet

9. WATER LEVEL
 Static water level 15 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 1454-T
 Signed W. J. Parsons
 By driller performing actual drilling on-site or contractor
 Date 07/09/2001

Date started 07/06/2001, 19____
 Date completed 07/06/2001, 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>80</u>		<u>1 hr</u>