

OFFICE USE ONLY  
 Log No. 89637  
 Permit No. 101  
 Basin. 1

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. 20301  
420 Bottom Rd

1. OWNER Carl Cardine ADDRESS AT WELL LOCATION  
 MAILING ADDRESS

2. LOCATION NE 1/4, SE 1/4 Sec 33 T. 19 N/S R. 28 E Churchill County  
 PERMIT NO. 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	Thick-ness
Surface Soil		0	6	6
Coarse Sand		6	11	5
Clay		11	17	6
Silt	X	17	24	7
Brown Clay		24	29	5
Silty Sand	X	29	37	8
Grey Clay		37	41	4
Brown Silt	X	41	49	8
Brown Clay		49	55	6
Brown Coarse Sand		55	87	32

8. WELL CONSTRUCTION  
 Depth Drilled 87 Feet Depth Cased 87 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From To  
12 Inches 8 Feet 50 Feet  
6 Inches 50 Feet 87 Feet  
 Inches Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>12.9</u>	<u>0.188</u>	<u>71</u>	<u>87</u>

Perforations:  
 Type perforation Machine Slot  
 Size perforation 50  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From 81 feet to 85 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

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

9. WATER LEVEL  
 Static water level 12-4 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature 59 °F Quality \_\_\_\_\_

Date started Nov 19, 1992  
 Date completed Nov 20, 1992

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>30</u>		<u>2 hrs-</u>

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name: Welsco Contractor  
 Address: Box 888 Contractor  
 Nevada contractor's license number issued by the State Contractor's Board 11952  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 772  
 Signed Welsco  
 By driller performing actual drilling on site or contractor  
 Date Nov 23-92

STATE ENGINEER'S OFFICE  
 REGISTERED  
 JAN - 7 1993