

STATE OF NEVADA
DIVISION OF WATER RESOURCES

OFFICE USE ONLY

Log No. 97794
Permit No. _____
Basin 101

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

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

NOTICE OF INTENT NO. 55715

1. OWNER Paul Shamlian
MAILING ADDRESS 1405 Rio Vista Dr Fallon, NV 89406
Fallon, NV 89406

ADDRESS AT WELL LOCATION 1010 Tarzyn Road
Fallon, NV 89406

2. LOCATION NE 1/4 SE 1/4 Sec. 8 T 19N R 29E Churchill County
PERMIT NO. NW SW Parcel No. 01039209 Subdivision Name Lot

3. WORK PERFORMED New Well
4. PROPOSED USE Domestic
5. WELL TYPE Rotary-mud

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Sand		0	4	4
Brown Sand		4	18	14
Black Sand		18	89	71
Black Clay		89	98	9
Brown Sand		98	108	10
Brown Clay		108	110	2
Brown Sand	X	110	115	5

8. WELL CONSTRUCTION

Depth Drilled 115 Depth Cased 115 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
12.3 Inches	0 Feet	50 Feet
10 Inches	50 Feet	115 Feet
Inches	Feet	Feet

CASING SCHEDULE

Size O.D. (inches)	Weight/Ft. (Pounds)	Wall Thickness	From (Feet)	To (Feet)
6.625	12.92	6.625	0	20
6	3.85	0.258	20	115

Perforations:
Type perforation Saw Cut
Size perforation 0.125
From 110 feet to 115 feet

Surface Seal: Yes No Seal Type: Concrete Grout
Depth of Seal 50
Placement Method: Pumped
Gravel Packed: Yes No
From 50 feet to 115 Feet

9. WATER LEVEL
Static Water Level 10 feet below land surface
Artesian Flow G.P.M. P.S.I.
Water temperature °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 403 McLean Road
Fallon, NV 89407
Contractor
Nevada contractor's license number 29064
issued by the State Contractor's Board
Nevada driller's license number issued by the 1454-T1
Division of Water Resources the on-site driller
Signed [Signature]
By driller performing the actual drilling on site or contractor
Date 8/5/2005

RECEIVED
05 AUG 26 AM 11:45
STATE ENGINEERS OFFICE

Latitude _____
Longitude _____

Date started 7/7/2005
Date completed 7/7/2005

7. WELL TEST DATA

TEST METHOD

Comments	GPM	Drawdown	Time (Hours)