

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

OFFICE USE ONLY
Log No. 105263
Permit No. _____
Basin 101

TT10-MW14

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

NOTICE OF INTENT NO. 54765

1. OWNER DEPT OF NAVY, NAS FALLON ADDRESS AT WELL LOCATION 4755 Pastore Rd
MAILING ADDRESS 4755 Pastore Rd Fallon, NV. 89496
Subdivision Name: NAS Fallon County: Churchill

2. LOCATION NE 1/4 SW 1/4 Sec 23 T18 N39 E Latitude 39.406121 UTM E 190353664 NAD 27
PERMIT/WAIVER No. TRP Longitude 118.698688 N 4303213 NAD 83/WGS 84
Issued by Water Resources Parcel No. 006-011-01

3. WORKED PERFORMED
 New Well Replace Recondition
 Deepen Other

4. PROPOSED USE
 Domestic Irrigation Test Stock
 Municipal/Industrial Monitor

5. WELL TYPE
 Cable Rotary RVC
 Air Other Auger

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>SILT SAND</u>		<u>0'</u>	<u>5'</u>	<u>5'</u>
<u>SAND</u>		<u>5'</u>	<u>10'</u>	<u>5'</u>
<u>SILT</u>		<u>10'</u>	<u>14'</u>	<u>4'</u>
<u>SILT SAND</u>		<u>14'</u>	<u>16'</u>	<u>2'</u>
<u>SAND</u>		<u>16'</u>	<u>18'</u>	<u>2'</u>

9. WELL CONSTRUCTION
Depth Drilled 18' Feet Depth Cased 18' Feet
HOLE DIAMETER (BIT SIZE)
From 0' To 18'
Inches _____ Feet _____
Inches _____ Feet _____
Inches _____ Feet _____

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2"</u>		<u>SLH. 40</u>	<u>0'</u>	<u>18'</u>

Perforations:
Type of perforation Manufactured Slotted
Size of perforation .010
From 3' feet to 18' feet
From _____ feet to _____ feet

Annular Seal: Yes No
 Neat Cement 0' to 1' Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured
Gravel Pack: Yes No 18' to 2 1/2' Pumped Poured
Type: 2 1/2" Sand
Bentonite Chips: Yes No 2 1/2' to 1' Pumped Poured
Type: 3/8" Bentonite chips

Date started: 10-28-07, 20 07
Date completed: 10-28-07, 20 07

7. Water Level
Static water level: 6' feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ °F
Quality: _____

8. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailor <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Gregg Drilling Contractor
Address 950 Howe Rd Contractor
Martinez, CA
Nevada contractor's license number C23-0038113
issued by the State Contractor's Board
Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-2328
Signed [Signature]
By driller performing actual drilling on site or contractor
Date 10-28-07