

**DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT**

OFFICE USE ONLY *108862*

Log No. _____
Permit No. _____
Basin *181*

PRINT OR TYPE ONLY

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340. NOTICE OF INTENT NO. **64512**

1. OWNER Oscar Cromer		ADDRESS AT WELL LOCATION 6700 Cox Rd,	
MAILING ADDRESS 6700 Cox Rd.		Fallon, NV 89406	
Fallon, NV 89406		Subdivision Name: _____ County: Churchill	
2. LOCATION SE1/4NW1/4 Sec18T19N/ R28E		Latitude 39.51094	UTM E _____ <input type="checkbox"/> NAD 27
PERMIT/WAIVER NO. _____	008-112-05	Longitude -118.88938	N _____ <input checked="" type="checkbox"/> NAD 83/WGS 84
<i>Issued by Water Resources</i>		Parcel No. _____	

3. WORK PERFORMED		4. PROPOSED USE		5. WELL TYPE	
<input type="checkbox"/> New Well	<input checked="" type="checkbox"/> Replace	<input type="checkbox"/> Recondition	<input type="checkbox"/> Domestic	<input type="checkbox"/> Irrigation	<input checked="" type="checkbox"/> Test
<input type="checkbox"/> Deepen	<input checked="" type="checkbox"/> Other <i>Plugged</i>	<input type="checkbox"/> Municipal/Industrial	<input type="checkbox"/> Monitor	<input type="checkbox"/> Stock	<input type="checkbox"/> Cable
					<input checked="" type="checkbox"/> Rotary
					<input type="checkbox"/> RVC
					<input type="checkbox"/> Air
					<input type="checkbox"/> Other

6. LITHOLOGIC LOG				
Material	Water Strata	From	To	Thick-ness
Brown Sand		0	17	17
Brown Clay		17	21	4
Coarse Brown Sand		21	42	21
Brown Silt		42	52	10
Gray Clay		52	67	15
Black Fine Sand		67	80	13
<i>39.511024° N</i> <i>118.88938° W</i> <i>NAD 27 (TH)</i>				
Pumped in 20% Grout from 80 to 20ft Pumped Neat cement from 20ft to surface				
No Casing was installed				
RECEIVED 2009 SEP 30 AM 10:59 STATE ENGINEERS OFFICE				
Date started:		<i>9/21</i>	<i>20</i>	<i>09</i>
Date completed:		<i>9/21</i>	<i>20</i>	<i>09</i>

9. WELL CONSTRUCTION				
Depth Drilled	80	Depth Cased	_____	Feet
HOLE DIAMETER (BIT SIZE)				
From		To		
6	Inches	0	Feet	80 Feet
_____	Inches	_____	Feet	_____ Feet
_____	Inches	_____	Feet	_____ Feet
CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
_____	_____	_____	_____	_____
Perforations:				
Type of perforation _____				
Size of perforation _____				
From _____	_____	feet to _____	_____	feet
From _____	_____	feet to _____	_____	feet
From _____	_____	feet to _____	_____	feet
From _____	_____	feet to _____	_____	feet
From _____	_____	feet to _____	_____	feet
Annular Seal: <input type="checkbox"/> Yes <input type="checkbox"/> No				
<input type="checkbox"/> Neat Cement	_____	to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Cement Grout	_____	to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout	_____	to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> ≥30% Bentonite Grout	_____	to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Gravel Pack: <input type="checkbox"/> Yes <input type="checkbox"/> No	_____	to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Type: _____				
Bentonite Chips: <input type="checkbox"/> Yes <input type="checkbox"/> No	_____	to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
Type: _____				

7. Water Level	
Static water level: _____	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"/> Bailer	<input type="checkbox"/> Pump	<input type="checkbox"/> Air Lift
	Draw Down		
	G.P.M.	(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 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 1753	
Signed <i>Wagner</i>	By driller performing actual drilling on site or contractor
Date 9/24/09	