

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

OFFICE USE ONLY 108863

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**  
 MAILING ADDRESS **6700 Cox Rd.**  
**Fallon, NV 89406**

ADDRESS AT WELL LOCATION **6700 Cox Rd,**  
**Fallon, NV 89406**  
 Subdivision Name: \_\_\_\_\_ County: **Churchill**

2. LOCATION **SE1/4NW1/4 Sec18T19N/ R28E**  
 PERMIT/WAIVER NO. \_\_\_\_\_  
 Issued by Water Resources Parcel No. **008-112-05**

Latitude **39.51166** UTM E  NAD 27  
 Longitude **-118.88838** N  NAD 83/WGS 84

3. WORK PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Other Plugged

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
Brown Sand		0	19	19
Brown Clay		19	24	6
Coarse Brown Sand		24	42	18
Brown Silt		42	56	14
Gray Clay		56	59	3
Black Fine Sand		59	70	11
Black Clay		70	83	13
Black Sand		83	120	37

9. WELL CONSTRUCTION  
 Depth Drilled **120** Feet Depth Cased \_\_\_\_\_ Feet  
 HOLE DIAMETER (BIT SIZE)  
 From \_\_\_\_\_ To \_\_\_\_\_  
**6** Inches \_\_\_\_\_ **0** Feet \_\_\_\_\_ **120** Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 CASING SCHEDULE  

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)

Pumped in 20% Grout from 120 to 20ft Pumped Neat cement from 20ft to surface

No Casing was installed

39.511744° N  
118.887390° W  
NAD 27 (72)

STATE ENGINEERS OFFICE  
 2009 SEP 30 AM 10:59  
 Date started: 9/18, 2009  
 Date completed: 9/18, 2009

Perforations:  
 Type of perforation \_\_\_\_\_  
 Size of perforation \_\_\_\_\_  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Annular Seal:  Yes  No  
 Neat Cement \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
 Cement Grout \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
 Concrete Grout \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
 ≥30% Bentonite Grout \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
 Gravel Pack:  Yes  No \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
 Type: \_\_\_\_\_  
 Bentonite Chips:  Yes  No \_\_\_\_\_ to \_\_\_\_\_  Pumped  Poured  
 Type: \_\_\_\_\_

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

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)

8. WELL TEST DATA

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

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 [Signature]  
 By driller performing actual drilling on site or contractor  
 Date 9/24/09