

WELL DRILLERS REPORT

Please complete this form in its entirety

1. OWNER Sam Millazzo ADDRESS Ballou's Lane Fallon, Nev. 89406

2. LOCATION NW 1/4 NE 1/4 Sec. 16 T. 19 N/S R. 8 E. Churchill County
PERMIT NO. _____

3. TYPE OF WORK	4. PROPOSED USE	5. TYPE WELL
New Well <input checked="" type="checkbox"/> Recondition <input type="checkbox"/>	Domestic <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Test <input type="checkbox"/>	Cable <input checked="" type="checkbox"/> Rotary <input type="checkbox"/>
Deepen <input type="checkbox"/> Other <input type="checkbox"/>	Municipal <input type="checkbox"/> Industrial <input type="checkbox"/> Stock <input type="checkbox"/>	Other <input type="checkbox"/>

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>Sand</u>		<u>0</u>	<u>3'</u>	
<u>Course sand</u>		<u>4'</u>	<u>6'</u>	
<u>Clay</u>		<u>6</u>	<u>11'</u>	
<u>fine sand</u>		<u>11</u>	<u>14'</u>	
<u>Clay</u>		<u>14'</u>	<u>25'</u>	
<u>Course sand</u>		<u>25'</u>	<u>28'</u>	
<u>Black mud</u>		<u>29'</u>	<u>30'</u>	

8. WELL CONSTRUCTION

Diameter hole 6" ID inches Total depth 30' feet
 Casing record PVC
 Weight per foot _____ Thickness _____

Diameter	From	To
<u>6"</u> inches	<u>0</u> feet	<u>30</u> feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

Surface seal: Yes No Type _____
 Depth of seal 12 feet
 Gravel packed: Yes No
 Gravel packed from _____ feet to _____ feet

Perforations:
 Type perforation RAW
 Size perforation 1/16
 From 20 feet to 30 feet
 From _____ feet to _____ feet

9. WATER LEVEL

Static water level 6' Feet below land surface
 Flow _____ G.P.M.
 Water temperature cold ° F. Quality good

Date started 10-22, 1970
 Date completed 10-29, 1970

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump

10. DRILLERS CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Cert Van Roman
 Address 845 McLean St Fallon Nev 89406
 Nevada contractor's license number _____
 Nevada driller's license number 609
 Signed Cert Van Roman
 Date 11-3-70

BAILER TEST

G.P.M.	Draw down	feet	hours