

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

OFFICE USE ONLY
Log No. 122655
Permit No. _____
Basin No. 10A

PRINT OR TYPE IN BLACK INK 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. 72866
WELL NAME (if applicable): _____

1. OWNER/CLIENT NAME Gomes, Chris
MAILING ADDRESS 320 St. Clair Rd
Fallon, NV 89406-9227

DETAILED ADDRESS AT WELL LOCATION 750 Drumm Ln
Fallon, NV 89406
Subdivision Name: _____ County: Churchill

2. PLS LOCATION NW 1/4 NE 1/4 7 Sec 18 N/S 29 E
PERMIT/WAIVER NO. 120994 006-751-08
Issued by Water Resources Current Parcel No.

Latitude 39.4441 UTM E NAD 27
Longitude -118.7687 UTM N NAD 83/WGS 84

3. WORKED PERFORMED
 New Well Deepen: Orig WL# _____
 Replacement: Original well log # 120994
 Recondition: Original well log # _____

4. PROPOSED USE
 Domestic Irrigation Monitor
 Mining / Dewater Com / Ind Stock
 Test / Other Mun / QM Rec

5. WELL TYPE
 Auger Rotary RVC
 Air Mud Sonic
 Other

6. LITHOLOGIC LOG				
Material Encountered	Lost Circ.	Water Strata	From	To
Brown Clay			0	3
Brown Sand			3	12
Brown Clay			12	14
Brown Sand			14	17
Brown Clay			17	23
Gray Sand			23	42
Black Clay			42	68
Black Sand			68	71
Black Clay			71	75
Gray Sand			75	78
Black Clay			78	82
Black Sand			82	86
Brown Clay			86	110
Brown Sand		X	110	118

9. INSTRUCTION
Depth Drilled: 118 Feet Depth Cased: 118 Feet

HOLE DIAMETER (BIT SIZE)			
	From	To	
<u>12</u> Inches	<u>0</u>	<u>118</u>	Feet
			Feet
			Feet

CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>12.92</u>	<u>.188</u>	<u>+2</u>	<u>18</u>
<u>6</u>	<u>4.1</u>	<u>.316</u>	<u>18</u>	<u>118</u>

ANNULAR MATERIALS
Sanitary Seal Yes No

Neat Cement 0 to 105 Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 Bentonite Chips _____ to _____ Pumped Poured
 Gravel Pack [> 0.2 in.] 105 to 118 Pumped Poured
 Sand Pack [< 0.2 in.] _____ to _____ Pumped Poured
 Other, explain: _____ to _____ Pumped Poured

Date started: 31-Jan, 2015
Date completed: 2-Feb, 2015

7. WATER QUALITIES
Static water level: 14 Feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ ° Fahrenheit
Water Quality: _____

PERFORATIONS:
Type of perforation: Saw Cut
Size of perforation: 1/8

From 114 Feet To 118 Feet
From _____ Feet To _____ Feet
From _____ Feet To _____ Feet
From _____ Feet To _____ Feet

8. WELL TEST DATA

Test Method:	Bailer	Pump	Air Lift
G.P.M.		Draw Down (Feet Below Static)	Recorded Time (Hours)

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.
Name Parsons Drilling, Inc. Contractor
Address P.O. Box 1265 Fallon, NV 89406 Contractor
Nevada contractor's license number as issued by the State Contractor's Board: 29064
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller): 2397
Signed: _____
Date: 2/10/2015
By driller performing actual drilling on site or contractor

RECEIVED
 FEB 10 2015
 DIVISION OF WATER RESOURCES
 STATE OF NEVADA

Replaces Well log 120994