

WELL DRILLERS REPORT

Please complete this form in its entirety

PRINT OR TYPE ONLY

NOTICE OF INTENT NO. 6517

1. OWNER Mel Aust ADDRESS AT WELL LOCATION 5035 Alcorn Rd  
 MAILING ADDRESS 5035 Alcorn Rd

2. LOCATION 1/4 Sec. 33 T. 19 N/S R. 28 E Churchill County  
 PERMIT NO. Issued by Water Resources Parcel No. Subdivision Name

3. TYPE OF WORK  
 New Well  Recondition   
 Deepen  Other

4. PROPOSED USE  
 Domestic  Irrigation  Test   
 Municipal  Industrial  Stock  Other

5. TYPE WELL  
 Cable  Rotary   
 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Sand		0	12	12
Clay		12	18	6
Sand & Gravel		18	36	18
Black Clay		36	49	13
Grey Clay		49	52	3
Sand & Gravel		52	74	22

8. WELL CONSTRUCTION  
 Diameter hole 6 5/8 inches Total depth 74 feet  
 Casing record 6 5/8 x 74  
 Weight per foot 10.98 Thickness 1.56

Diameter	From	To
<u>10</u> inches	<u>0</u> feet	<u>50</u> feet
<u>6</u> inches	<u>50</u> feet	<u>74</u> feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

Surface seal: Yes  No  Type Cement  
 Depth of seal 50 feet  
 Gravel packed: Yes  No   
 Gravel packed from \_\_\_\_\_ feet to \_\_\_\_\_ feet

Perforations:  
 Type perforation Waltz knife  
 Size perforation 1/4 x 2  
 From 69 feet to 72 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

9. WATER LEVEL  
 Static water level B feet below land surface  
 Flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ ° F. Quality \_\_\_\_\_

Date started Aug 18, 1986  
 Date completed Aug 19, 1986

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
<u>AIR 3000 @</u>	<u>100 G.P.M.</u>		

10. DRILLERS CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name Welsco Corp. Contractor  
 Address Box 888 Contractor  
 Nevada contractor's license number 11752  
 Nevada contractor's drillers number 772  
 Nevada driller's license number 772 Actual Driller  
 Signed W. J. J. J. Contractor  
 Date Sep 3-86

BAILER TEST  
 G.P.M. \_\_\_\_\_ Draw down \_\_\_\_\_ feet \_\_\_\_\_ hours  
 G.P.M. \_\_\_\_\_ Draw down \_\_\_\_\_ feet \_\_\_\_\_ hours  
 G.P.M. \_\_\_\_\_ Draw down \_\_\_\_\_ feet \_\_\_\_\_ hours