

WELL DRILLER'S REPORT

Please complete this form in its entirety

PRINT OR TYPE ONLY

NOTICE OF INTENT NO. 11687

1. OWNER TOM GRIMES ADDRESS AT WELL LOCATION 1551 TUMBLEWEED
 MAILING ADDRESS 1551 TUMBLEWEED LANE FALLON, NV 89406
 FALLON, NV 89406
 2. LOCATION SE 1/4 NW 1/4 Sec. 19 T. 18 N. R. 29 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
 5. TYPE WELL
 Cable Rotary
 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
SAND		0	5	5
SAND		5	16	11
CLAY		16	18	2
SAND	X	18	32	14
CLAY		32	34	2
GRAY SAND & SILT		34	76	42
CLAY		76	89	13
SAND	X	89	97	8
CLAY		97	100	2
GRAVEL & COARSE SANDX		100	109	9

8. WELL CONSTRUCTION
 Diameter 6 inches Total depth 109 feet
 Casing record 6 5/8 X 109
 Weight per foot 12.9 Thickness 188

Diameter	From	To
<u>6 5/8</u> inches	<u>0</u> feet	<u>109</u> feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet

 Surface seal: Yes No Type CEMENT
 Depth of seal 5.0 feet
 Gravel packed: Yes No
 Gravel packed from _____ feet to _____ feet
 Perforations:
 Type perforation MACHINE SLOT
 Size perforation 3/32 X 3
 From 10.2 #000 feet to 10.7 #000 feet
 From _____ feet to _____ feet

'88 DEC -1 9:50
 RECEIVED
 STATE ENGINEERS OFFICE

Date started NOVEMBER 15, 19 88
 Date completed NOVEMBER 28, 19 88

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
<u>AIR BLOWN</u>	<u>@ 30 GPM</u>		

9. WATER LEVEL
 Static water level 10 feet below land surface
 Flow _____ G.P.M. _____ P.S.I.
 Water temperature 61 °F Quality UNKWN

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name WELSCO CORP.
 Address P. O. BOX 888 FALLON, NV 89406
 Nevada contractor's license number issued by the State Contractor's Board 11752
 Nevada contractor's driller's number issued by the Division of Water Resources 772
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1562
 Signed [Signature]
 Date NOVEMBER 29, 1988

BAILER TEST
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours