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WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 17764

1. OWNER Bill Thurman ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS 520 Douglas St. 4672 Benson Lane  
Fallon, Nev. 89406 Fallon, Nev. 89406  
 2. LOCATION SW 1/4 NE 1/4 Sec. 2 T. 18 N/S R 29 E. Churchill County  
 PERMIT NO. 60631-17 Parcel No. \_\_\_\_\_ Subdivision Name \_\_\_\_\_  
 Issued by Water Resources \_\_\_\_\_

3. WORK PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Abandon  Other \_\_\_\_\_  
 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
TopSoil		0	4	4
Coarse Brown Sand		4	10	6
Greenish Yellow Clay		10	23	13
Green Fine Sand		23	26	3
Green Clay		26	38	12
Black Clay		38	59	21
Black Coarse Sand		59	64	5
Black Clay		64	73	9
Green Clay		73	79	6
Gray Coarse Sand		79	83	4
Green Clay		83	87	4
Gray Coarse Sand		87	93	6
Green Clay		93	97	4
Gray Coarse Sand		97	102	5
Brown & Gray Coarse Sand	X	102	110	8

8. WELL CONSTRUCTION  
 Depth Drilled 110 Feet Depth Cased 110 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 12 Inches To 0 Feet 110 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6-5/8	12.92	.188	0	110

Perforations:  
 Type perforation Millcut  
 Size perforation 1/8"  
 From 105 feet to 109 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 50'  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From 50 feet to 110 feet

9. WATER LEVEL  
 Static water level 12 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature Cool °F Quality Unknown

Date started October 18, 19 91  
 Date completed October 18, 19 91

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

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  
 Address P.O. Box 1265 Contractor  
Fallon, Nev. 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 1715  
 Signed Doug Parsons  
 By Doug Parsons Driller performing actual drilling on site or contractor  
 Date Oct 29, 1991