WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

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

OFFICE USE ONLY
Log No. 39233
Permit No.
Basin 101

NOTICE OF INTENT NO. 19087

1. OWNER Frank Norcutt
MAILING ADDRESS 3567 Stark Lane
Fallon, Nev. 89406

ADDRESS AT WELL LOCATION
6410 Victor Drive
Fallon, Nevada 89406

2. LOCATION SE ¼ SE ¼ Sec 31 T 20 N/S R 28 E Churchill County

PERMIT NO. ____ (Issued by Water Resources) | 09-0381-19 (Parcel No.) | Micheal A. & Claudia Casey (Subdivision Name)

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	Thickness
Coarse Sand		0	6	6
Fine Sand		6	13	7
Brown Coarse Sand		13	16	3
Green Clay		16	21	5
Brown Caly		21	30	9
Brown Fine Sand		30	33	3
Brown Coarse Sand	X	33	42	9

'92 MAY -6 AM 11:19
STATE ENGINEERS

Date started May 4, 1992
Date completed May 4, 1992

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

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

8. WELL CONSTRUCTION
Depth Drilled 42 Feet Depth Cased 42 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
10 Inches	0 Feet	42 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	42

Perforations:
Type perforation Millcut
Size perforation 1/8"
From 38 feet to 41 feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: ☒ Yes ☐ No
Depth of Seal 25
Placement Method: ☒ Pumped ☐ Poured

Seal Type:
☒ Neat Cement
☐ Cement Grout
☐ Concrete Grout

Gravel Packed: ☒ Yes ☐ No
From 25 feet to 42 feet

9. WATER LEVEL
Static water level 9' 4" feet below land surface
Artesian flow ____ G.P.M. ____ P.S.I.
Water temperature Cool °F Quality Unknown

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, NEVADA 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 driller performing actual drilling on site or contractor

Date May 5, 1992

(Rev. 3-91) USE ADDITIONAL SHEETS IF NECESSARY (O)-627