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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. 21328

1. OWNER Gerald Sorensen ADDRESS AT WELL LOCATION 4750 Schurz Highway  
 MAILING ADDRESS 4750 Schurz Highway Fallon, NV 89406  
 2. LOCATION NW 1/4 SW 1/4 Sec. 13 T. 18 N/S R. 28 E Churchill County  
 PERMIT NO. 6-411-07 Issued by Water Resources Parcel No. 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	Thick-ness
Sand		0	12	12
Brown Clay		12	16	4
Brown COarse Sand		16	18	2
Green Clay		18	24	6
Brown COarse Sand		24	36	12
Black Clay		36	47	11
Black COarse Sand		47	50	3
Green Clay		50	53	3
Black Clay		53	55	2
Black COarse Sand		55	57	2
Black Clay		57	75	18
Black COarse Sand		75	87	12
Gray Clay		87	95	8
Black & Green Coarse Sand				
Sand		95	115	20
Brown Clay		115	126	11
Brown COarse Sand		126	138	12
Brown Clay		138	141	3
Brown COarse Sand	X	141	155	14

8. WELL CONSTRUCTION  
 Depth Drilled 155 Feet Depth Cased 155 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 0 To 155  
12 Inches Feet Feet  
 Inches Feet Feet  
 Inches Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8 5/8	16.94	.188	0	155

Perforations:  
 Type perforation Mill Cut  
 Size perforation 1/8"  
 From 151 feet to 154 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ 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 155 feet

9. WATER LEVEL  
 Static water level 14' feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature cool °F Quality unknown

Date started October 15, 19 92  
 Date completed October 15, 19 92

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			

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, NV 89406  
 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 Oct 20, 1992