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. 34576
Permit No.
Basin

NOTICE OF INTENT NO. 19659

1. OWNER Resolution Trust Corp
MAILING ADDRESS 2910 N 44th. St
Phoenix, AZ 85018

ADDRESS AT WELL LOCATION 1910 Morgan
Lot 134 Bk M

2. LOCATION NE ¼ NE ¼ Sec. 5 T. 17 N/S R. 21 E. Storey County
PERMIT NO. — Issued by Water Resources | 03-111-25 Parcel No. | Virginia City Highlands Unit # 1 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
Tripped in				
to find Total Depth				
380 feet.				
Perforate from top				
to bottom. 4				
rows. Hole was dry.				
Dump neat cement from				
surface until it came				
to the surface.				
27 - 100 pound bags				
cement per yard / 5				
gallons of water per				
bag.				
7614 LBS				
Casing was cut off				
below ground level.				

Date started 4/27/92
Date completed 4/28/92, 19

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Airlift

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

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

HOLE DIAMETER (BIT SIZE)

	From	To
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)

Perforations:
Type perforation
Size perforation
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: ☐ Yes ☐ No
Depth of Seal
Placement Method: ☐ Pumped ☐ Poured
Seal Type: ☐ Neat Cement ☐ Cement Grout ☐ Concrete Grout

Gravel Packed: ☐ Yes ☐ No
From ____ feet to ____ feet

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

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name (Contractor) Aqua Drilling & Well Service, Inc
Address (Contractor) 625 Spice Islands Dr Suite 1
Sparks, Nv 89431
Nevada contractor's license number issued by the State Contractor's Board 15291
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1804
Signed Roger M Thrall
(By driller performing actual drilling on site or contractor)
Date Roger M. Thrall 4/29/92

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