

OFFICE USE ONLY
 Log No. 39613
 Permit No. _____
 Basin 8-101

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

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. 21427

1. OWNER Mike Casey ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 1600 Allen Road 9215 Marshall Road
Fallon, NV 89406 Fallon, NV 89407
 2. LOCATION NW 1/4 SE 1/4 Sec. 15 T. 27190 S R. 1927 E Churchill County
 PERMIT NO. 7-17139 Michael And Claudia Casey
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	18	18
Green Clay		18	27	9
Brown Clay		27	37	10
Brown Coarse Sand		37	49	12
Fine Gray Sand		49	53	4
Black & Green Coarse Sand		53	58	5
Brown Clay		58	64	6
Brown Coarse Sand		64	83	19
Gray Coarse Sand		83	91	8
Brown Clay		91	93	2
Brown Coarse Sand	X	93	110	17

8. WELL CONSTRUCTION
 Depth Drilled 110 Feet Depth Cased 110 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 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 MILL CUT
 Size perforation 1/8"
 From 106 feet to 109 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 110 feet

9. WATER LEVEL
 Static water level 25' 7" 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, NV 89407
 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

Date started October 16, 19 92
 Date completed October 16, 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			