

PRINT OR TYPE ONLY
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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

OFFICE USE ONLY
 Log No. 39826
 Permit No. _____
 Basin 76

NOTICE OF INTENT NO. 21419

1. OWNER Eric Robinson Construction ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 3812 Boyer Road 3390 Farm District Road
Fallon, NV 89406 Fernley, NV 89408
 2. LOCATION SW 1/4 NE 1/4 Sec. 22 T. 20 N/S R. 25 E Lyon County
 PERMIT NO. 21-343-03 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
Sand & Gravel		0	13	13
Brown Clay		13	47	34
Kobbles & Gravel		47	53	6
Brown Clay		53	57	4
Kobbles & Gravel		57	91	34
Fine Red Sand		91	96	5
Kobbles & Gravel		96	106	10
Brown Clay		106	108	2
Red & Black Sand & Gravel	X	108	116	8
Red Clay		116	125	9
Red & Black Sand & Gravel		125	144	19
Red Clay		144	161	17
Boulders & Gravel		161	172	11
Red Clay		172	189	17
Fine Red Sand	X	189	194	5
Red & Black Boulders & Clay	X	194	204	10

8. WELL CONSTRUCTION
 Depth Drilled 204 Feet Depth Cased 204 Feet
 HOLE DIAMETER (BIT SIZE)
 From 13 Inches 0 Feet 204 Feet
 To _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8	16.94	.188	0	204

Perforations:
 Type perforation Mill Cut
 Size perforation 1/8"
 From 197 feet to 202 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 100 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 100 feet to 204 feet

9. WATER LEVEL
 Static water level 63 1/2 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 Nov 3, 1992

Date started October 30, 1992
 Date completed November 2, 1992

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			

