

OFFICE USE ONLY
 Log No. 40826
 Permit No. 101
 Basin 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. 22605

1. OWNER Michael Casey ADDRESS AT WELL LOCATION 933 Thornbird
 MAILING ADDRESS 1600 Allen Road Fallon, NV 89406
 2. LOCATION SW 1/4 NE 1/4 Sec. 6 T. 17 N. S. R. 29 E. Churchill County
 PERMIT NO. 006-691-27 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	Thickness
Sand		0	3	3
Brown Coarse Sand		3	8	5
Brown Clay		8	12	4
Fine Brown Sand		12	21	9
Brown Coarse Sand		21	23	2
Fine Brown Sand		23	26	3
Brown & Black Coarse & Fine Sand	X	26	29	3

8. WELL CONSTRUCTION
 Depth Drilled 29 Feet Depth Cased 29 Feet
 HOLE DIAMETER (BIT SIZE)
 From 0 Feet To 29 Feet
10 Inches 0 Feet 29 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	29

Perforations:
 Type perforation Mill Cut
 Size perforation 1/8"
 From 26 feet to 28 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 25 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 25 feet to 29 feet

9. WATER LEVEL
 Static water level 6' 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, NV 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 March 11, 1993

Date started March 9, 1993
 Date completed March 9, 1993

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

93 MAR 15 P2:04
 STATE ENGINEERS OFFICE