

STATE OF NEVADA  
 DIVISION OF WATER RESOURCES  
**WELL DRILLER'S REPORT**

OFFICE USE ONLY  
 Log No. 40653  
 Permit No. \_\_\_\_\_  
 Basin 8-101  
 NOTICE OF INTENT NO. 23441

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

1. OWNER Larry Rickman ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS 42 Jeanette 1948 Western Avenue  
Carson City, NV 89706 Fallon, NV89406  
 2. LOCATION NW 1/4 NE 1/4 Sec. 19 T. 19 N. R 28 E. Churchill County  
 PERMIT NO. 8-132-27 Subdivision Name \_\_\_\_\_  
Issued by Water Resources Parcel No.

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	10	10
Greenish Brown Clay		10	12	2
Brown Clay		12	30	18
Brown Sand		30	37	7
Fine Green Sand		37	45	8
Fine & Coarse Grey Sand		45	48	3
Brown Coarse Sand	X	48	56	8
Green Sandy Clay		56	57	1

8. WELL CONSTRUCTION  
 Depth Drilled 57 Feet Depth Cased 57 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 10 Inches To 0 Feet 57 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	57

Perforations:  
 Type perforation Mill Cut  
 Size perforation 1/8  
 From 49 feet to 54 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 57 feet

9. WATER LEVEL  
 Static water level 7 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature cool °F Quality unknown

Date started 10-27, 19 93  
 Date completed 10-28, 19 93

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, NV89407-1265  
 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 1753  
 Signed [Signature]  
 By driller performing actual drilling on site or contractor  
 Date 10-28-93

'93 NOV 22 P217  
 STATE ENGINEERS OFFICE