

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

OFFICE USE ONLY
 Log No. 40057
 Permit No. _____
 Basin 101
 NOTICE OF INTENT NO. 22597

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 Jim Ghiglia ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 450 Michael Dr. 5586 Riversedge Dr.
Fallon, NV 89406 Fallon, NV 89406
 2. LOCATION SE $\frac{1}{4}$ NW $\frac{1}{4}$ Sec. 29 T 19 N X R. 28 E Churchill County
 PERMIT NO. 8-551-42 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		0	19	19
Brown Clay		19	21	2
Brown Coarse Sand		21	29	8
Fine Brown Sand		29	33	4
Coarse Brown Sand		33	36	3
Fine Brown Sand		36	44	8
Fine Gray Sand		44	49	5
Black & Green Coarse Sand		49	53	4
Fine Gray Sand		53	56	3
Black & Green Coarse Sand		56	61	5
Fine Green Sand		61	67	6
Brown Coarse Sand		67	79	12
Fine Brown Sand		79	108	29
Fine Gray Sand		108	110	2
Black & Green Coarse Sand		110	113	3
Gray Sandy Clay		113	131	18
Black & Green Coarse Sand		131	137	6
Brown Coarse Sand	X	137	146	9

8. WELL CONSTRUCTION
 Depth Drilled 146 Feet Depth Cased 146 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 Inches To 0 Feet 146 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	146

Perforations:
 Type perforation Mill Cut
 Size perforation 1/8"
 From 142 feet to 145 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal 100
 Placement Method: Pumped
 Poured
 Gravel Packed: Yes No
 From 100 feet to 146 feet

9. WATER LEVEL
 Static water level 16' 3" 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 Feb 24, 1992

Date started Feb. 22 19 93
 Date completed Feb. 22 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			

STATE ENGINEER
 FEB 26 1992
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