

OFFICE USE ONLY  
Log No. 43568043569  
Permit No. \_\_\_\_\_  
Basin. B-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. 22776  
Sandhill Rd

1. OWNER Carl Kenyon ADDRESS AT WELL LOCATION \_\_\_\_\_  
MAILING ADDRESS 2595 Sandhill Rd \_\_\_\_\_  
2. LOCATION SW 1/4 NE 35 T. 18 N/S R. 28 E. Churchill County  
PERMIT NO. 10-431-09 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
<u>Sandy clay</u>		<u>0</u>	<u>10</u>	<u>10</u>
<u>Brown clay</u>		<u>10</u>	<u>32</u>	<u>22</u>
<u>Black sand</u>	<u>x</u>	<u>32</u>		
<u>Ure-cased - filled with hole</u>				
<u>PLS - Log #43568</u>				

8. WELL CONSTRUCTION  
Depth Drilled \_\_\_\_\_ Feet Depth Cased \_\_\_\_\_ Feet  
HOLE DIAMETER (BIT SIZE)  
From \_\_\_\_\_ To \_\_\_\_\_  
Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)

#2

Material	Water Strata	From	To	Thick-ness
<u>silt</u>		<u>0</u>	<u>12</u>	<u>12</u>
<u>Brown clay</u>		<u>12</u>	<u>34</u>	<u>22</u>
<u>Black sand</u>		<u>34</u>		
<u>Ure-cased - filled with hole</u>				
<u>Dug - Log #43569</u>				

Perforations:  
Type perforation \_\_\_\_\_  
Size perforation \_\_\_\_\_  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet

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

STATE OF NEVADA

JAN 24 1995

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

Date started \_\_\_\_\_, 19\_\_\_\_  
Date completed \_\_\_\_\_, 19\_\_\_\_

10. DRILLER'S CERTIFICATION  
This well was drilled under my supervision and the report is true to the best of my knowledge.

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

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

Name \_\_\_\_\_ Contractor  
Address \_\_\_\_\_ Contractor  
Nevada contractor's license number issued by the State Contractor's Board \_\_\_\_\_  
Nevada driller's license number issued by the Division of Water Resources, the on-site driller \_\_\_\_\_  
Signed \_\_\_\_\_ By driller performing actual drilling on site or contractor  
Date \_\_\_\_\_