

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

OFFICE USE ONLY
 Log No. 43570
 Permit No. _____
 Basin 8-101

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

NOTICE OF INTENT NO. 20799
 ADDRESS AT WELL LOCATION 635 Sunrise loop

1. OWNER Bob Hendrix
 MAILING ADDRESS _____

2. LOCATION NE 1/4 SE 1/4 Sec 6 T 18 N/S R 29 E Churchill County
 PERMIT NO. _____
 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
Sand		0	6	6
Clay		6	15	9
Sand	X	15	35	20
Black Clay		35	48	13
Black Silt		48	81	33
Grey Clay		81	90	9
Reddish Gravel	X	90	97	7
Sand & Gravel	X	97	114	17

8. WELL CONSTRUCTION
 Depth Drilled 114 Feet Depth Cascd. 114 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
10 Inches 50 Feet
6 Inches 50 Feet 114 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 7/8</u>	<u>12.7</u>	<u>.188</u>	<u>±1</u>	<u>50</u>

Perforations:
 Type perforation Machine Slot
 Size perforation .050
 From _____ feet to _____ feet
 From 107 feet to 113 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 _____
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 12'-8" feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started _____
 Date completed Sept 29, 1993

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 checked="" type="checkbox"/> Air Lift	<u>30</u>		

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Welsco Contractor
 Address Box 888 Fallon Nev. Contractor
 Nevada contractor's license number issued by the State Contractor's Board 4752
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 772
 Signed [Signature] by driller performing actual drilling on site or contractor
 Date Sept 29-93