

Log No. **44785**  
 Permit No. \_\_\_\_\_  
 Basin **073**

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 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. **15277**

1. OWNER **NDOT** ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS **LOVELOCK MAINTENANCE STA** \_\_\_\_\_  
**LOVELOCK, NV.** \_\_\_\_\_  
 2. LOCATION **NE 1/4 SW 1/4 Sec. 27 T 26 N R 31 E** \_\_\_\_\_  
**PERSHING** County  
 PERMIT NO. **M/O 635 A** 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 **AUGER**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<b>BROWN GRAVELLY SAND</b>	-	<b>0</b>	<b>2'</b>	<b>2'</b>
<b>BROWN SILTY CLAY</b>	-	<b>2'</b>	<b>18'</b>	<b>16'</b>
<b>BROWN SANDY SILT</b>	-	<b>18'</b>	<b>20'</b>	<b>2'</b>
<b>BROWN SILTY SAND</b>	<b>22'</b>	<b>20'</b>	<b>30'</b>	<b>10'</b>

8. WELL CONSTRUCTION  
 Depth Drilled **30** Feet Depth Cased **30** Feet  
 HOLE DIAMETER (BIT SIZE)  
 From **8** Inches To **30** Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>2</b>	<b>5CH. 40</b>	<b>PVC</b>	<b>0</b>	<b>30</b>

Perforations:  
 Type perforation **FACTORY SLOT**  
 Size perforation **0.02"**  
 From **10** feet to **30** feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal **8'**  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout

Gravel Packed:  Yes  No  
 From **8** feet to **30** feet

**RECEIVED**  
**JUN 16 1994**

STATE ENGINEER'S OFFICE

Date started **6/7**, 19**93**  
 Date completed **6/7**, 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			
		<b>N/A</b>	

9. WATER LEVEL  
 Static water level **22** feet below land surface  
 Artesian flow **N/A** G.P.M. **N/A** P.S.I.  
 Water temperature **COLD** Quality **N/A**

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name **ANDRESEN EXPLORATION DRILLING** Contractor  
 Address **1635 BELFORD RD.** Contractor  
**RENO, NV. 89509**  
 Nevada contractor's license number issued by the State Contractor's Board **0034525**  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **M 1667**  
 Signed \_\_\_\_\_  
 By driller performing actual drilling on site or contractor  
 Date **6/7/94**