WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

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

OFFICE USE ONLY
Log No. 48098
Permit No.
Basin 8-101

NOTICE OF INTENT NO. 28640

1. OWNER Hammon Construction
MAILING ADDRESS 5075 Elkhorn
Fallon, Nevada 89406

ADDRESS AT WELL LOCATION
1855 Ryan Way
Fallon, Nevada 89406

2. LOCATION NW ¼ NE ¼ Sec. 24 T. 19 N/S R. 28 E. Churchill County

PERMIT NO. ____ Issued by Water Resources | 08-262-64 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	Thickness
Brown Sand		0	8	8
Brown Clay		8	20	12
Brown Sand		20	33	13
Gray Sand		33	45	12
Gray Clay		45	55	10
Gray Sand		55	85	30
Brown Clay		85	87	2
Brown Sand	XX	87	103	16

'95 MAY 11 AM 10:54
STATE ENGINEER'S OFFICE

Date started April 12, 19 95
Date completed April 13, 19 95

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

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

8. WELL CONSTRUCTION
Depth Drilled 103 Feet Depth Cased 103 Feet

HOLE DIAMETER (BIT SIZE)

		From	To
10 Inches		0 Feet	103 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	98

Perforations:
Type perforation Well Screen
Size perforation .030
From 98 feet to 103 feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: ☒ Yes ☐ No
Depth of Seal 50ft.
Placement Method: ☒ Pumped ☐ Poured
Seal Type: ☒ Neat Cement ☐ Cement Grout ☐ Concrete Grout

Gravel Packed: ☒ Yes ☐ No
From 50 feet to 103 feet

9. WATER LEVEL
Static water level 11' 11" 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, NEVADA 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 1753

Signed Wayne Parsons (By driller performing actual drilling on site or contractor)
Date 5/9/95

(Rev. 3-91) USE ADDITIONAL SHEETS IF NECESSARY (O) 627