

PRINT OR TYPE ONLY
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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. 21112

1. OWNER Bob Hendrix ADDRESS AT WELL LOCATION 537 Sunshine Loop
 MAILING ADDRESS 2100 Mt View
 2. LOCATION NW 1/4 SE 1/4 Sec 6 T. 29N R. 18E E. Churchill County
 PERMIT NO. _____ Parcel No. Hendrix Estates 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
Brown Sand		0	20	20
Brown Sandy Clay	X	20	39	19
Black clay		39	67	28
Black Sand	Y	67	75	8
Grey Sand	Y	75	89	14
Grey Clay		89	99	10
Brown Sand	✓	99	115	16

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)
6 7/8	12.9	.188	+1	115

Perforations:
 Type perforation Machine Slot
 Size perforation .0050
 From _____ feet to _____ feet
 From 108 feet to 112 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 50 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. (WATER LEVEL)
 Static water level 8 6 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 59 °F Quality _____

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 885 Contractor
 Nevada contractor's license number 11752 issued by the State Contractor's Board
 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 12-7-92

Date started Dec 3, 1992
 Date completed Dec 5, 1992

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>20</u>	<u>1</u>	

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 JAN - 7 1993
 STATE ENGINEER'S OFFICE