

COPIES TO  
 - DIVISION OF WATER RESOURCES  
 - CLIENT'S COPY  
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STATE OF NEVADA  
 DIVISION OF WATER RESOURCES  
 WELL DRILLER'S REPORT

OFFICE USE ONLY  
 Log No. 95659  
 Permit No. \_\_\_\_\_  
 Basin 101  
 NOTICE OF INTENT NO. 55123

PRINT OR TYPE ONLY

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

1. OWNER **Hawk Properties**  
 MAILING ADDRESS 2171 W Williams Ave.  
Fallon, NV 89406  
 ADDRESS AT WELL LOCATION **Hawk Properties**  
4635 Hawk Drive  
Fallon, NV 89406

2. LOCATION sw  $\frac{1}{4}$  se  $\frac{1}{4}$  Sec 21 T 19 N R 28 E Churchill County  
 PERMIT NO. 008-282-43  
 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	Thickness
Sand		0	5	5
Brown clay		5	19	14
Brown sand		19	25	6
Gray clay		25	29	4
Gray sand		29	38	9
Black clay		38	42	4
Black Sand		42	63	21
Brown sand	XX	63	74	11

8. WELL CONSTRUCTION

Depth Drilled 74 Feet Depth Cased 74 Feet

HOLE DIAMETER (BIT SIZE)

From	To
<u>10</u> Inches	<u>0</u> Feet <u>74</u> Feet
_____ Inches	_____ Feet _____ Feet
_____ Inches	_____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>12.92</u>	<u>.188</u>	<u>0</u>	<u>20</u>
<u>6 pVC</u>	<u>3.82</u>	<u>.258</u>	<u>20</u>	<u>74</u>

Perforations:  
 Type perforation Saw Cut  
 Size perforation 1/8  
 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 \_\_\_\_\_ 10 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, NV 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-T1  
 Signed [Signature]  
 By driller performing actual drilling on site or contractor  
 Date 03/24/05

Date started 03/02, 20 05  
 Date completed 03/02, 20 05

7. WELL TEST DATE

TEST METHOD:	Bailer	Pump	Air Lift
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
G.P.M.	Draw Down (Feet Below Static)		Time (Hours)
<u>20</u>			<u>1hr</u>

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 05 MAR 28 PM 1:22  
 STATE ENGINEERS OFFICE