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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. 29842

1. OWNER Frehner Const. ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS 4040 Frehner Rd \_\_\_\_\_  
N. LV NV 89030 \_\_\_\_\_  
 2. LOCATION NE 1/4 NE 1/4 Sec 17 T. 26 N/S R. 59 E \_\_\_\_\_  
Clark County  
 PERMIT NO. C-1031 Issued by Water Resources Parcel No. 223-17-000-001 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
<u>Perforated From</u>		<u>350</u>	<u>50</u>	<u>300</u>
<u>Pumped with neat cement</u>				
<u>From</u>		<u>350</u>	<u>0</u>	
<u>WD 84</u>				
<u>N 35' 41' 02.4"</u>				
<u>W 115' 22' 48.0"</u>				
<u>orig log # 98898</u>				

8. WELL CONSTRUCTION

Depth Drilled \_\_\_\_\_ Feet Depth Cased \_\_\_\_\_ Feet

HOLE DIAMETER (BIT SIZE)

From		To	
Inches	Feet	Inches	Feet
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8 5/8</u>				

Perforations:  
 Type perforation \_\_\_\_\_  
 Size perforation \_\_\_\_\_  
 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 145 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started 4-17 2007  
 Date completed 4-19 2007

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			

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Redding Drilling Contractor  
 Address 530 E Larson Contractor  
Henderson NV 89044  
 Nevada contractor's license number issued by the State Contractor's Board 38155  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1617  
 Signed Floyd Mitchell  
 By driller performing actual drilling on site or contractor  
 Date 5-8-07