

STATE OF NEVADA
DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
Log No. **117387**
Permit No. _____
Basin _____

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

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

NOTICE OF INTENT NO. **36383**

1. OWNER John Lawrence Moor ADDRESS AT WELL LOCATION 8 mi no of
MAILING ADDRESS 1305 E oak AVE Beatty W side of 95
Tom Poe CA 93436 Subdivision Name: _____ County: ade

2. LOCATION NE 1/4 SW 1/4 Sec 32 T 10 N R 42 E Latitude N 37° 01' 21.7" UTM E NAD 27
PERMIT/WAIVER No. none 18-08-06 Longitude W 116° 01' 47.3" NAD 83/WGS 84

Issued by Water Resources Parcel No. _____

3. WORKED PERFORMED
 New Well Replace Recondition
 Deepen 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>Boulders sand & gravel</u>		<u>0</u>	<u>30</u>	<u>30</u>
<u>Gravel & sand</u>				
<u>lightly cemented</u>		<u>30</u>	<u>75</u>	<u>45</u>
<u>lightly cemented</u>				
<u>silica sand</u>		<u>75</u>	<u>120</u>	<u>45</u>
<u>water</u>	<u>30'</u>			

9. WELL CONSTRUCTION

Depth Drilled 106 Feet Depth Cased 106 Feet

HOLE DIAMETER (BIT SIZE)

From	To
<u>10</u> Inches	<u>0</u> Feet <u>120</u> Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6"</u>	<u>PLASTIC</u>	<u>CERTILOCK</u>	<u>+2</u>	<u>120</u>
<u>9"</u>	<u>steel</u>	<u>.188 wall</u>	<u>+2</u>	<u>106</u>

Perforations:

Type of perforation FACTORY CERTILOCK PERF

Size of perforation .040

From 75 feet to 120 feet

From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement to _____ Pumped Poured

Cement Grout to _____ Pumped Poured

concrete Grout 0 to 50' Pumped Poured

≥30% Bentonite Grout to _____ Pumped Poured

Gravel Pack: Yes No 120 to 50 Pumped Poured

Type: 3/8 pea gravel

Bentonite Chips: Yes No to _____ Pumped Poured

Type: through plastic pipe Displace From Bottom

Date started: 6-1 20 13

Date completed: 6-4 20 13

7. Water Level

Static water level: 20 feet below land surface

Artesian Flow: _____ G.P.M. ~~_____~~ P.S.I.

Water Temperature: cool °F

Quality: good

8. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>Air Lift 100</u>	<u>UNRUNDN</u>	<u>2 HRS</u>

10. DRILLER'S CERTIFICATION

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

Name Budget Drilling Contractor

Address 4938 E. Gardner Ave LV NV 89110 Contractor

Nevada contractor's license number _____

issued by the State Contractor's Board 0077029

Nevada driller's license number issued by the _____

Division of Water Resources, the on-site driller 2325

Signed Yuan Cao By driller performing actual drilling on-site or contractor

Date 6-27-13