

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

OFFICE USE ONLY  
Log No. **117393**  
Permit No. **55487**  
Basin **212**

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

1. OWNER **MICHAEL + ANN MARIE MILLER** NOTICE OF INTENT NO. **36604**  
MAILING ADDRESS **SAME** ADDRESS AT WELL LOCATION **8335 W. COUGER**  
**LV, NV, 89113**

2. LOCATION **N 1/4 SW 1/4 Sec 16 T 22 N R 60 E** Latitude **N 36° 01' - 52.3"** UTM E  NAD 27  
PERMIT/WAIVER No. **QM 55487 176-16-301-029** Longitude **W 115° 16' - 22.3"**  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  Cable  Rotary  RVC  
 Municipal/Industrial  Monitor  Stock  Air  Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<b>Sleeved Well</b>	<b>W</b>	<b>74</b>	<b>4 1/2</b>	<b>PVC 480</b>
<b>Depth - 794 FT</b>				
<b>STATIC 575 FT</b>				
<b>BOTTOM 200 FT Blank</b>		<b>794</b>		
<b>100 FT Ref 032</b>				<b>775 FT</b>
<b>674 FT Blank</b>				<b>1/2 PVC 480</b>
<b>Total Depth 794 FT</b>				

9. WELL CONSTRUCTION

Depth Drilled	Feet	Depth Cased	Feet
HOLE DIAMETER (BIT SIZE)			
	From	To	
	Inches	Feet	Feet
	Inches	Feet	Feet
	Inches	Feet	Feet

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>77.5</b>	<b>40</b>	<b>6.75</b>		

Perforations:

Type of perforation \_\_\_\_\_  
Size of perforation \_\_\_\_\_

From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Annular Seal:  Yes  No

Neat Cement to \_\_\_\_\_  Pumped  Poured  
 Cement Grout to \_\_\_\_\_  Pumped  Poured  
 Concrete Grout to \_\_\_\_\_  Pumped  Poured  
 ≥30% Bentonite Grout to \_\_\_\_\_  Pumped  Poured

Gravel Pack:  Yes  No to \_\_\_\_\_  Pumped  Poured  
Type: \_\_\_\_\_

Bentonite Chips:  Yes  No to \_\_\_\_\_  Pumped  Poured  
Type: \_\_\_\_\_

7. Water Level  
Static water level: **475** feet below land surface  
Artesian Flow: \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water Temperature: \_\_\_\_\_ °F  
Quality: \_\_\_\_\_

8. WELL TEST DATA

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

10. DRILLER'S CERTIFICATION

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

Name **V. H. Dimick** Contractor  
Address **13040 HORSE DR., LV. NV**  
**89166** **LV, NV, 89166**  
Nevada contractor's license number \_\_\_\_\_  
issued by the State Contractor's Board **10062**  
Nevada driller's license number issued by the **552**  
Division of Water Resources, the on-site driller

Signed **V. H. Dimick**  
By driller performing actual drilling on-site or contractor  
Date **7-23-2013**