

OFFICE USE ONLY
 Log No. 27400
 Permit No. _____
 Basin B-101 Cassia Desert

WELL DRILLERS REPORT

Please complete this form in its entirety

PRINT OR TYPE ONLY

NOTICE OF INTENT NO. 7724

1. OWNER Richard Paladine ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 4240 Central Place
Fallen Nev. 89406
 2. LOCATION NE 1/4 NW 1/4 Sec. 19 T. 19 N/S R. 29 E County _____
 PERMIT NO. None Parcel No. 3 Subdivision Name _____
Issued by Water Resources

3. TYPE OF WORK
 New Well Recondition
 Deepen Other

4. PROPOSED USE
 Domestic Irrigation Test
 Municipal Industrial Stock

5. TYPE WELL
 Cable Rotary
 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
		0	32	
This hole was abandoned and cemented from top to bottom with the casing removed.				
Even with the waiver on this well we feel we could not make a good well. The client would be happy with				

8. WELL CONSTRUCTION

Diameter hole _____ inches Total depth _____ feet
 Casing record _____
 Weight per foot _____ Thickness _____

Diameter	From	To
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

Surface seal: Yes No Type _____
 Depth of seal _____ feet
 Gravel packed: Yes No
 Gravel packed from _____ feet to _____ feet

Perforations:
 Type perforation _____
 Size perforation _____
 From _____ feet to _____ feet
 From _____ feet to _____ feet

9. WATER LEVEL

Static water level _____ feet below land surface
 Flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ ° F. Quality _____

10. DRILLERS CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Petter Drilling Co. Contractor
 Address P.O. Box 1815, Fallen Nev. 89406 Contractor
 Nevada contractor's license number 20178
 Nevada contractor's drillers number 1348
 Nevada driller's license number 1473 Actual Driller
 Signed Jim Petter Contractor
 Date 6-18-86

Date started 6-4, 1986
 Date completed 6-18, 1986

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump

BAILER TEST

G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours