

OFFICE USE ONLY
 Log No. 27631
 Permit No. _____
 Basin 212
 2468

WELL DRILLERS REPORT

Please complete this form in its entirety

PRINT OR TYPE ONLY

NOTICE OF INTENT NO. _____

1. OWNER Ernie Selman ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 3333 Cinder Lane
6580 Russell, L.O.
 2. LOCATION NE $\frac{1}{4}$ NW $\frac{1}{4}$ Sec. 35 T. 21 N/S R. 60 E Clark County
 PERMIT NO. _____ Issued by Water Resources Parcel No. _____ Subdivision Name _____

3. TYPE OF WORK
 New Well Recondition
 Deepen Other
 4. PROPOSED USE
 Domestic Irrigation Test
 Municipal Industrial Stock Other
 5. TYPE WELL
 Cable Rotary
 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
sand and rock		0	13	13
cemented conglomerate		13	218	205
red clay		218	225	7
cemented conglomerate		225	280	55
caving gravel		280	316	36
fractured cemented conglomerate	X	316	400	84
red sandstone		400	407	7
fractured cemented conglomerate	XX	407	500	93

8. WELL CONSTRUCTION
 Diameter hole 12 inches Total depth 500 feet
 Casing record 8-5/8"
 Weight per foot 14.11 Thickness .156
 Diameter From To
8-5/8" inches 0 feet 500 feet
 _____ inches _____ feet _____ feet
 Surface seal: Yes No Type cement
 Depth of seal 50' feet
 Gravel packed: Yes No
 Gravel packed from _____ feet to _____ feet
 Perforations:
 Type perforation torch
 Size perforation 3/16" x 4" x 3 around
 From 310 feet to 500 feet
 From _____ feet to _____ feet

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9. WATER LEVEL
 Static water level 354' 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 Allen Drilling Inc. Contractor
 Address 4847 So. Valley View Blvd. Contractor
 Nevada contractor's license number 018916 + 018917
 Nevada contractor's drillers number 1301
 Nevada driller's license number 1376 Actual Driller
 Signed Fred B. Allen III Contractor
 Date August 12, 1986

Date started July 7, 1986
 Date completed July 16, 1986

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
<u>air</u>	<u>50</u>	<u>?</u>	<u>1</u>

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