



WELL DRILLER'S REPORT

Please complete this form in its entirety

NOTICE OF INTENT NO. 2463

PRINT OR TYPE ONLY

1. OWNER Alice Lockner ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS _____

2. LOCATION N 1/2 1/4 N 1/2 1/4 Sec 29 T 21 S N/S R. 54 E County Nye
 PERMIT NO. _____ Parcel No. 666 Subdivision Name Green Saddle Ranch

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
<u>Clay</u>		<u>0</u>	<u>98</u>	<u>98</u>
<u>Clay</u>		<u>98</u>	<u>108</u>	<u>10</u>
<u>Clay</u>		<u>108</u>	<u>138</u>	<u>30</u>
<u>Clay</u>		<u>138</u>	<u>144</u>	<u>6</u>
<u>Clay</u>		<u>144</u>	<u>160</u>	<u>16</u>

8. WELL CONSTRUCTION
 Diameter 12 1/4 inches Total depth 160 feet
 _____ inches
 _____ inches
 Casing record 8 3/8
 Weight per foot 14.11 Thickness 156
 Diameter _____ From _____ To _____
8 3/8 inches -1 feet 160 feet
 _____ inches _____ feet _____ feet
 Surface seal: Yes No Type Cmt
 Depth of seal 50 feet
 Gravel packed: Yes No
 Gravel packed from 50 feet to 160 feet
 Perforations:
 Type perforation torch
 Size perforation 1 1/8 x 6"
 From 120 feet to 160 feet
 From _____ feet to _____ feet

RECEIVED
 FEB 17 1987
 Div. of Water Resources
 Branch Office - Las Vegas, NV

Date started 8-21 1986
 Date completed 8-23 1986

7. WELL TEST DATA

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

9. WATER LEVEL
 Static water level 60 feet below land surface
 Flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Custom Drilling Inc Contractor
 Address 4425 Steacy Ave Contractor
 Nevada contractor's license number issued by the State Contractor's Board 19719
 Nevada contractor's driller's number issued by the Division of Water Resources 1081
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller.
 Signed C.B. [Signature]
 By driller performing actual drilling on site or contractor
 Date 8-30-86

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