

WELL DRILLERS REPORT

Please complete this form in its entirety

PRINT OR TYPE ONLY

NOTICE OF INTENT NO. 1834

1. OWNER John E. Ellenburg ADDRESS AT WELL LOCATION SANDY VALLEY
 MAILING ADDRESS LAS VEGAS NEV.

2. LOCATION SE 1/4 SW 1/4 Sec. 22 T. 24 N/S R. 56 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

5. TYPE WELL
 Cable Rotary
 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Loose Sand		0	2	2
Sandy Brown clay		2	24	22
Gray clay		24	93	69
Brown Limestone	W	93	121	28
Gray clay	W	121	130	17
Brown sandy clay	W	138	180	42

8. WELL CONSTRUCTION

Diameter hole 12 inches Total depth 180 feet
 Casing record 180 ft. 8"
 Weight per foot _____ Thickness 1.56

Diameter	From	To
<u>8</u> inches	<u>7.1</u> feet	<u>180</u> feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

Surface seal: Yes No Type CEMENT
 Depth of seal 50 ft. feet
 Gravel packed: Yes No
 Gravel packed from 50 feet to 180 feet

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Div. of Water Resources
 Branch Office - Las Vegas, NV

Perforations:
 Type perforation Torch
 Size perforation 3/16 x 12' x 4 per ft.
 From 100 feet to 180 feet
 From _____ feet to _____ feet

9. WATER LEVEL

Static water level 80 feet below land surface
 Flow _____ G.P.M. _____ P.S.I.
 Water temperature cool ° F. Quality Good

10. DRILLERS CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name ARTESIAN DRILLING Contractor
 Address 5804 JERRY PI. Contractor
 Nevada contractor's license number 021173
 Nevada contractor's drillers number 1256
 Nevada driller's license number 1256 Actual Driller
 Signed Don Babcock Contractor
 Date 2-5-87

7. WELL TEST DATA

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

BAILER TEST
 G.P.M. 25 Draw down 5 feet 2 hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours