

OFFICE USE ONLY
 Log No. 30457
 Permit No. _____
 Basin. 8-105

1

WELL DRILLER'S REPORT

Please complete this form in its entirety

NOTICE OF INTENT NO. 10791

PRINT OR TYPE ONLY

1. OWNER Kurt J. Thomas ADDRESS AT WELL LOCATION 640 MUSTANG
 MAILING ADDRESS Box 1545
Garland, NV 89410
 2. LOCATION Se 1/4 Sec 24 N/S R. 20 County DOUGLAS
APR 27 101-bit Subdivision Name RUBENSTADT H
 PERMIT NO. _____ Issued by Water Resources Parcel No. _____

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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Gravel Cemented gravel, clay	NO	0	125	125
Sandy clay gravel & loose rock	YES	125	205	80
More rock & COBBLE SAND	YES	205	222	17

8. WELL CONSTRUCTION
 Diameter 8 inches Total depth 222 feet
 Casing record 222
 Weight per foot 7 Thickness 188
 Diameter 8 inches From 0 feet To 222 feet
 Surface seal: Yes No Type Concrete
 Depth of seal 50 feet
 Gravel packed: Yes No
 Gravel packed from _____ feet to _____ feet
 Perforations:
 Type perforation fact. saw slot
 Size perforation 2 1/2 x 1/8
 From 182 feet to 222 feet

9. WATER LEVEL
 Static water level 123 feet below land surface
 Flow _____ G.P.M. _____ P.S.I.
 Water temperature 61.0 F Quality good

Date started 10-22, 1988
 Date completed 10-28, 1988

7. WELL TEST DATA

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

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Kawchack Drilling, Inc. Contractor
 Address _____ Contractor
 Nevada contractor's license number issued by the State Contractor's Board 021268
 Nevada contractor's driller's number issued by the Division of Water Resources 1380
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1533
 Signed Scott Chilton
 By driller performing actual drilling on site or contractor
 Date 11-1-88

BAILER TEST
 G.P.M. 18+ Draw down 0 feet 2 hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours