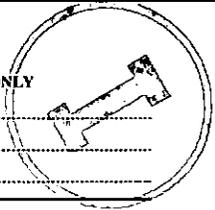


Log No. **33970**
 Permit No. _____
 Basin **162**



WELL DRILLER'S REPORT

Please complete this form in its entirety

PRINT OR TYPE ONLY

NOTICE OF INTENT NO. **6056**

1. OWNER **JOHN BARONE** ADDRESS AT WELL LOCATION **CORNER of**
 MAILING ADDRESS **764 E TWAIN** **MURPHY & MEETON**
LAS VEGAS, NEV **PARRIP, NV 89041**

2. LOCATION $\frac{1}{4}$ **SW** $\frac{1}{4}$ Sec. **13** T. **20** N/S R. **52** E **NYE** County
 PERMIT NO. **#100734 - 4** 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
Brown Clay		0	3	3
Lt. Gray Clay		3	32	29
Lt. Casing Clay	x	32	33	1
Lt Br. Sticky Clay		33	124	91
Soft Casing bit Brown Clay	x	124	135	11
Sticky Dr. Br. Clay		135	150	15

8. WELL CONSTRUCTION

Diameter **12** inches Total depth **150** feet
 _____ inches
 _____ inches

Casing record **8**
 Weight per foot _____ Thickness **156**

Diameter	From	To
8 inches	0 feet	151 feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

Surface seal: Yes No Type **Cement Grout**
 Depth of seal **56** feet
 Gravel packed: Yes No
 Gravel packed from **56** feet to **150** feet

Perforations:
 Type perforation **Factory Cut**
 Size perforation **1/8 x 3**
 From **110** feet to **130** feet
 From _____ feet to _____ feet

RECEIVED
JUL 16 1990
 Div. of Water Resources
 Branch Office - Las Vegas, NV

Date started **7-9**, 19 **90**
 Date completed **7-12**, 19 **90**

7. WELL TEST DATA

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

9. WATER LEVEL
 Static water level **40** feet below land surface
 Flow _____ G.P.M. _____ P.S.I.
 Water temperature **61.0** °F Quality **Good**

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge

Name **OTM Gallard Drilling Co** Contractor
 Address **6022 S. ENCLAVE AVE - LV NV 89120** Contractor

Nevada contractor's license number issued by the State Contractor's Board **4796**
 Nevada contractor's driller's number issued by the Division of Water Resources **115**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller _____
 Signed **OTM Gallard** By driller performing actual drilling on site or contractor
 Date **7-14-90**

BAILER TEST

G.P.M. **30** Draw down **12** feet $\frac{1}{2}$ hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours