

PRINT OR TYPE ONLY  
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WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. **9461**

1. OWNER **JEXACO**

MAILING ADDRESS **BROADBENT & ASSOC.**

ADDRESS AT WELL LOCATION **JEXACO**

**1500 W. CHARLESTON, LAS VEGAS, NV.**

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2. LOCATION **SE 1/4, SW 1/4 Sec 33 T 20 N R 61 E** County

PERMIT NO. **MO2111** Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED  
 New Well  
 Replace  
 Abandon  
 Deepen  
 Recondition  
 Other  
 Domestic  
 Municipal/Industrial  
 Irrigation  
 Monitor  
 Stock  
 Test  
 Cable  
 Air  
 Rotary  
 RVC  
 Other **Rauger**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Concrete		0	0.5	0.5
Silty clay, sand, gravel		0.5	3.0	2.5
Silty clay		3.0	7.0	4.0
Silty sand w/ clay, gravel		7.0	11.0	4.0
Caliche		11.0	14.0	3.0
Silty sand w/ gravel, clay		14.0	20.0	6.0

8. WELL CONSTRUCTION

Depth Drilled **20** Feet Depth Cased **20** Feet

HOLE DIAMETER (BIT SIZE)  
 10" Inches From 0 Feet To 20 Feet  
 Inches Feet Feet

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4"	2.0	Sch 40	0	20

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Branch Office - Las Vegas, NV

Perforations:  
 Type perforation **Factory slotted**  
 Size perforation **0.020**  
 From **8'** feet to **20'** feet  
 From **8'** feet to **20'** feet  
 From **8'** feet to **20'** feet  
 From **8'** feet to **20'** feet

9. WATER LEVEL

Static water level **8.98** feet below land surface  
 Artesian 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 **Richard Tolaris** Contractor  
 Address **4670 S. Tolaris** Contractor  
**Las Vegas, NV 89103**

Nevada contractor's license number \_\_\_\_\_  
 issued by the State Contractor's Board

Nevada driller's license number issued by the  
 Division of Water Resources on-site driller **M1585-T1**

Signed **Richard Tolaris** by driller performing actual drilling on site or contractor

Date started **Dec 4** 19**91**  
 Date completed **Dec 4** 19**91**

7. WELL TEST DATA

TEST METHOD:	Bailer	Pump	Air Lift
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	