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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. **11606**

1. OWNER **JOHN & PEGGY ELLENBURG** ADDRESS AT WELL LOCATION **EMERALD + TETON SANDY VALLEY**
 MAILING ADDRESS _____

2. LOCATION **SE 1/4 NW 1/4 Sec. 22 T. 24 N/S R. 56 E. CLARK** County
 PERMIT NO. **580-160-090** Issued by Water Resources Parcel No. _____ Subdivision Name _____

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other _____
 4. PROPOSED USE
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock
 5. WELL TYPE
 Cable Rotary RVC
 Air Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
SANDY LOAM		0	16	16
CALICHE		16	18	2
CLAY		18	48	30
CALICHE		48	51	3
CLAY		51	73	22
CALICHE		73	77	4
CLAY		77	98	21
CALICHE	W.B.	98	101	3
CLAY		101	118	17
CALICHE	W.B.	118	120	2
CLAY		120	127	7
CALICHE	W.B.	127	130	3
CLAY		130	158	28
CALICHE	W.B.	158	163	5
CLAY		163	170	7

8. WELL CONSTRUCTION
 Depth Drilled **170** Feet Depth Cased **170** Feet
 HOLE DIAMETER (BIT SIZE)
 From **12 1/4** Inches To **0** Feet **170** Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8 3/8	16.94	.188	0	170

Perforations:
 Type perforation **FACTORY SAWCUT**
 Size perforation **8 INCH BY 3 INCH**
 From **170** feet to **150** feet
 From _____ feet to _____ feet

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 Branch Office - Las Vegas, NV

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal **50**
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From **170** feet to **50** feet

9. WATER LEVEL
 Static water level **9.3** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **COOL** °F Quality _____

Date started **3-4** 19**93**
 Date completed **3-18** 19**93**

7. WELL TEST DATA

TEST METHOD:	G.P.M.		Time (Hours)
	Bailer	Pump	
<input type="checkbox"/> Bailer			
<input type="checkbox"/> Pump			
<input type="checkbox"/> Air Lift			

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name **GREAT BASIN DRILLING** Contractor
 Address **HC# 78 BOX 80358** Contractor
PATRUMP NV. 89041
 Nevada contractor's license number issued by the State Contractor's Board **30880**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1573**
 Signed **Amie Brown**
 By driller performing actual drilling on site or contractor
 Date **3-22-93**