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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. 11828

1. OWNER LESLIE LANG ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 300 E. TROPICANA AVE - Apt 97 3950 W. PROSPECTOR LN
Las Vegas, Nev 89109 PAHRUMP, NEV 89041
 2. LOCATION SE 1/4 W 1/4 Sec 18 T. 20 N/S R. 53 E NYE County
 PERMIT NO. _____ Parcel No. 85 Subdivision Name CHAS. PK. UNIT #1
 Issued by Water Resources _____

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	Thick-ness
Brown Clay		0	4	4
Sticky Br. Clay		4	7	3
Lt Br Clay		7	18	11
Soft limestone		18	32	14
Coarse Gravel	x	32	33	1
Brown Clay		33	80	47
Soft Clay	x	80	84	4
Firm Br Clay		84	110	26
Sandy Clay	x	110	112	2
Lt Br Clay		112	125	13
Sand	x	125	128	3
Soft Clay		128	145	17
Hard Br. Clay		145	160	15

8. WELL CONSTRUCTION (2' above ground)
 Depth Drilled 160 Feet Depth Cased 162 Feet
 HOLE DIAMETER (BIT SIZE)
 From 12 Inches To 0 Feet 160 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8 7/8</u>	<u>18</u>	<u>1 1/2</u>	<u>0</u>	<u>162</u>

Perforations:
 Type perforation 1/8 x 3
 Size perforation 3/16 inch
 From 120 feet to 160 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 Surface Seal: Yes No
 Depth of Seal 57
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 57 feet to 160 feet

9. WATER LEVEL
 Static water level 40 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 66.0 °F Quality Good

Date started 9/20, 1993
 Date completed 9/29, 1993

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailor <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift	<u>30</u>	<u>10</u>	<u>40 MIN</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name GULLARD DRILLING CO Contractor
 Address 6022 S. ENCLIO AVE Contractor
LAS VEGAS, NEV 89120
 Nevada contractor's license number issued by the State Contractor's Board 4796
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 115
 Signed DM Gullard
 By driller performing actual drilling on site or contractor
 Date 10/16/93