

OFFICE USE ONLY
 Log No. 45549
 Permit No. _____
 Basin. 162



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 DO NOT WRITE ON BACK

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. 10919

1. OWNER BLAIR HOPE ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS HCR 66 52312 JOENITTA ST AND MASON ST
PAHRUMP NEV 89041 LOT # 18 TIM ST
 2. LOCATION NE 1/4 NW 1/4 Sec 25 T. 19 S N/S R. 52 E N4E County _____
 PERMIT NO. _____ UNIT # 6 BELL VISTA Sub
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
TOP SOIL		0	1	1
HARD BRN CLAY		1	4	3
GREY CLAY		4	17	13
BRN CLAY		17	28	11
HARD BRN CLAY		28	47	19
BRN CLAY	WB	47	90	43
HARD BRN CLAY		90	111	21
BRN CLAY	WB	111	140	29

8. WELL CONSTRUCTION
 Depth Drilled 140 Feet Depth Cased 140 Feet
 HOLE DIAMETER (BIT SIZE)
 From 12 1/2 Inches To 0 Feet 140 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 5/8</u>	<u>17.11</u>	<u>1.88</u>	<u>0</u>	<u>140</u>

 Perforations:
 Type perforation TORCH CUT
 Size perforation 4" X 6"
 From 100 feet to 140 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 50' Neat Cement
 Placement Method: Pumped Concrete Grout
 Poured
 Gravel Packed: Yes No
 From 140 feet to 50' feet

9. WATER LEVEL
 Static water level 39 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature Cold °F Quality Good

RECEIVED

OCT 03 1994

Div. of Water Resources
 Branch Office - Las Vegas, NV

Date started SEPT 24 1994
 Date completed SEPT 27 1994

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input checked="" type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift	<u>25</u>	<u>3'</u>	<u>1 hr</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name RON MAILLON DRILLING
Contractor
 Address Box 265 PAHRUMP NEV 89041
Contractor
 Nevada contractor's license number 0035704
 issued by the State Contractor's Board
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1625
 Signed Ron Maillon
By driller performing actual drilling on site or contractor
 Date SEPT 27 1994