

OFFICE USE ONLY
 Log No. 47595
 Permit No. _____
 Basin. 212

PRINT OR TYPE ONLY
 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. 14016

1. OWNER KEN COWART ADDRESS AT WELL LOCATION BATTISTA + WELPMAN
 MAILING ADDRESS _____
 2. LOCATION NE 1/4 SE 1/4 Sec. 9 T. 23 N/S R. 61 E. CLARK County
 PERMIT NO. _____ 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	Thick-ness
<u>SAND, GRAVEL + ROCKS</u>		<u>0</u>	<u>20</u>	<u>20</u>
<u>CMT. GRAVEL w/ STRKS OF LOOSE SAND + ROCKS.</u>		<u>20</u>	<u>360</u>	<u>340</u>
<u>SANDSTONE</u>	<u>380</u>	<u>360</u>	<u>490</u>	<u>130</u>
<u>CMT GRAVEL</u>		<u>490</u>	<u>550</u>	<u>60</u>

8. WELL CONSTRUCTION
 Depth Drilled 550 Feet Depth Cased 550 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
1 1/4 inches 0 Feet 60 Feet
1 1/2 inches 60 Feet 550 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>16.94</u>	<u>.188</u>	<u>+1</u>	<u>550</u>

Perforations:
 Type perforation FACTORY SAW
 Size perforation 1 1/2 x 2 1/2
 From 510 feet to 530 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

RECEIVED
 MAY 24 1995
 Div. of Water Resources
 Branch Office - Las Vegas, NV

Surface Seal: Yes No Seal Type:
 Depth of Seal 50 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 50 feet to 550 feet

9. WATER LEVEL
 Static water level 306 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 5-11, 1995
 Date completed 5-16, 1995

7. WELL TEST DATA

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

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name DESERT DRILLING Contractor
 Address 6475 GARY AVE Contractor
LAS VEGAS, NV.
 Nevada contractor's license number issued by the State Contractor's Board 34274
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1594
 Signed Timdell Couch
 By driller performing actual drilling on site or contractor
 Date 5-22-95