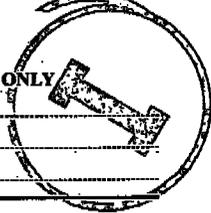


OFFICE USE ONLY  
 Log No. 49695  
 Permit No. \_\_\_\_\_  
 Basin 212



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. 17160

1. OWNER HET ADDRESS AT WELL LOCATION Cluna Plm 1260 } to the  
 MAILING ADDRESS 4720 S. Decatur 41  
WV NJ 89103

2. LOCATION SE 1/4 SW 1/4 Sec. 16 T. 21 N. R. 61 E. CLUTE County \_\_\_\_\_  
 PERMIT NO. MO-2410 A 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 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>clay</u>		<u>0</u>	<u>8</u>	
<u>clay with sand</u>		<u>8</u>	<u>12</u>	
<u>fine</u>		<u>12</u>	<u>25</u>	

8. WELL CONSTRUCTION  
 Depth Drilled 25 Feet Depth Cased 25 Feet

HOLE DIAMETER (BIT SIZE)  
 From 10 Inches 0 Feet 25 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4.5</u>	<u>40</u>	<u>SC40</u>	<u>0</u>	<u>10</u>

Perforations:  
 Type perforation 8/64 Screen  
 Size perforation 0.25  
 From 10 feet to 25 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 8  Neat Cement  
 Placement Method:  Pumped  Poured  Cement Grout  
 Concrete Grout  
 Gravel Packed:  Yes  No  
 From 10 feet to 25 feet

9. WATER LEVEL  
 Static water level 13 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started 10-20, 1995  
 Date completed 10-20, 1995

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<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 Wozan Environmental Inc. Contractor  
 Address 4301 S. Valley View #21 Contractor  
WV NJ 89103  
 Nevada contractor's license number 0059528 issued by the State Contractor's Board  
 Nevada driller's license number issued by the Division of Water Resources the on-site driller 11847  
 Signed \_\_\_\_\_  
 By driller performing actual drilling on-site or contractor  
 Date 10-27-95