



PRINT OR TYPE ONLY
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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. **17908**

1. OWNER **Anthony L. ANZO** ADDRESS AT WELL LOCATION **4220 MARTIN ST**
 MAILING ADDRESS _____
 2. LOCATION **SE 1/4 NE 1/4 Sec. 29 T. 215 N/S R. 54 E. NYR** County _____
 PERMIT NO. **45-401-16** Parcel No. **Fox Hollow** Subdivision Name _____
 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	Thickness
Sandy clay		0	6	6
Clay Gravel		6	29	23
Clay		29	158	129
Caliche	TR	158	161	3
Clay		161	196	35
Caliche	WB	196	199	3
Clay		199	244	45
Caliche	WB	244	247	3
Clay		247	261	14
Caliche	WB	261	264	3
Clay		264	271	7
Caliche	WB	271	273	2
Clay		273	275	2

8. WELL CONSTRUCTION
 Depth Drilled **275** Feet Depth Cased **275** Feet

HOLE DIAMETER (BIT SIZE)
 From **12 1/4** Inches To **140** Feet
 _____ Inches _____ Feet
 _____ Inches _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8 5/8	16.94	.188	0	140

Perforations:
 Type perforation **Factory Sawcut**
 Size perforation **1/2 x 3**
 From **233** feet to **255** feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

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 **275** feet

9. WATER LEVEL
 Static water level: **33** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started **5-13**, 19**96**
 Date completed **5-17**, 19**96**

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 **Great Basin Drilling** Contractor
 Address **PO Box 4220** Contractor
Pahrump NV 89041
 Nevada contractor's license number **30880**
 issued by the State Contractor's Board
 Nevada driller's license number issued by the **1642**
 Division of Water Resources, the on-site driller
 Signed **PO Box 42 Thomas Dew**
 By driller performing actual drilling on site or contractor
 Date **5/28/96**

