

WELL DRILLERS REPORT

Please complete this form in its entirety

Log No. 59694
 Permit No. 17
 Basin Clark

1. OWNER ROE MAGNESS ADDRESS 3532 E. PATRICK LANE

2. LOCATION SW 1/4 NW 1/4 Sec. 31 T. 21 N/S R. 62E CLARK County
 PERMIT NO. _____

3. TYPE OF WORK	4. PROPOSED USE	5. TYPE WELL
New Well <input checked="" type="checkbox"/> Recondition <input type="checkbox"/>	Domestic <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Test <input type="checkbox"/>	Cable <input type="checkbox"/> Rotary <input checked="" type="checkbox"/>
Deepen <input type="checkbox"/> Other <input type="checkbox"/>	Municipal <input type="checkbox"/> Industrial <input type="checkbox"/> Stock <input type="checkbox"/>	Other <input type="checkbox"/> AIR

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Clay		0	20	20
Caliche		20	75	55
SAND		75	70	5
ROCK		70	105	35
Clay		105	110	5
CEMENTED GRAVEL		110	140	30
GRAVEL		140	155	15
SAND		155	165	10
CEMENTED GRAVEL		165	180	15

8. WELL CONSTRUCTION

Diameter hole 12 inches Total depth _____ feet
 Casing record _____
 Weight per foot 12.20 Thickness 1.50

Diameter	From	To
<u>8.518</u> inches	<u>0</u> feet	<u>180</u> feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

Surface seal: Yes No Type CEMENT
 Depth of seal 50 feet
 Gravel packed: Yes No
 Gravel packed from _____ feet to _____ feet

Perforations:
 Type perforation TORCH
 Size perforation 1/4 x 1/4 x 4 AROUND
 From 60 feet to 180 feet
 From _____ feet to _____ feet

9. WATER LEVEL

Static water level 50 Feet below land surface
 Flow _____ G.P.M.
 Water temperature _____ ° F. Quality _____

Date started 4-15, 1979
 Date completed 4-16, 1979

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump

AIR BALLER TEST

G.P.M. 4.5 Draw down 3 feet 1/2 hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours

10. DRILLERS CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name ALLEN WATER WELL SERVICE
 Address PO. Box 1549 R.V. NEV. 89114
 Nevada contractor's license number 5095
 Nevada driller's license number 40
 Signed [Signature]
 Date 5-10-79

