

WELL DRILLERS REPORT

Please complete this form in its entirety

Permit No. _____
 Basin _____

NOTICE OF INTENT NO. 1343

PRINT OR TYPE ONLY

1. OWNER Edward Knocks ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS _____

2. LOCATION 1/4 NE 1/4 Sec. 18 T. 21 S. N/S R. 54 E County Nye
 PERMIT NO. 3 Parcel No. 606 BK B Subdivision Name Charlotte Estates
 Issued by Water Resources _____

3. TYPE OF WORK
 New Well Recondition
 Deepen Other
 4. PROPOSED USE
 Domestic Irrigation Test
 Municipal Industrial Stock
 5. TYPE WELL
 Cable Rotary
 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Red Clay		0	30	30
Chert		30	36	6
Red Clay		36	55	24
Chert	X	55	62	7
Red + white Clay w/ Black	X			
Gravel	X		140	68

8. WELL CONSTRUCTION
 Diameter hole 12 1/4 inches Total depth 140 feet
 Casing record 8 5/8 x 140
 Weight per foot 14.56 Thickness 156

Diameter	From	To
<u>8 5/8</u> inches	<u>0</u> feet	<u>140</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 50 feet to 140 feet
 Perforations:
 Type perforation Touch
 Size perforation 1/8 x 12 2 Rows
 From 100 feet to 140 feet
 From _____ feet to _____ feet

RECEIVED

APR 6 1984

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

Date started 3-21, 1984
 Date completed 3-21, 1984

7. WELL TEST DATA

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

9. WATER LEVEL
 Static water level 40 feet below land surface
 Flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ ° F. Quality _____

10. DRILLERS CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Custom Drilling inc Contractor
 Address 4425 Stacey Ave L.V. Contractor
 Nevada contractor's license number 19219
 Nevada contractor's drillers number _____
 Nevada driller's license number 1081 Actual Driller
 Signed Custom Drilling inc Contractor
 Date 4-4-84

BAILER TEST
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours