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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. **21987**

1. OWNER **Eugene Mayer** ADDRESS AT WELL LOCATION **1250 E Garfield**
 MAILING ADDRESS **PO Box 1632** **Pahrump NV**
 2. LOCATION **SW 1/4 S.W. 1/4 Sec. 35 T. 20S N/S R. 53 E** County **Nye**
 PERMIT NO. **41-181-19** Subdivision Name **Caluada unit Lot 24**

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
Brown Clay		0	4'	4'
Sandstone		4'	8'	4
Sticky Clay		8	10	2
Soft Sandstone		10	25	15
Sticky Clay		25	28	2
White Hard Caliche		28	40	12
Lt Br Clay		40	50	10
Hard pan		50	55	5
Brown Clay		55	60	5
Water		60	60	
Sticky Brown Clay		60	65	5
Grey Clay		65	70	5
Brown Clay		70	80	10
Soft Clay		80	84	4
Turn Brown Clay		84	110	24
Sandstone		110	112	2
Lt Br Clay		112	125	13
Sand		125	128	3
Soft Clay		128	140	12

8. WELL CONSTRUCTION
 Depth Drilled **140** Feet Depth Cased **141** Feet

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

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8 5/8	18	1.88	0	140

Perforations:
 Type perforation **20' Factory**
 Size perforation **1/2 x 3"**
 From **125** feet to **105** feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Depth of Seal **52**
 Placement Method: Pumped Poured

Gravel Packed: Yes No
 From **140** feet to **52** feet

9. WATER LEVEL
 Static water level **40'** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **Cold** °F Quality **good**

Date started **4/19/95**
 Date completed **5/14/95**

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
30	10'	40 min

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name **Eugene Mayer** Contractor
 Address **PO Box 632** Contractor
Pahrump NV 89041
 Nevada contractor's license number issued by the State Contractor's Board **0035506**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1864**
 Signed **Eugene Mayer**
 By driller performing actual drilling on site or contractor
 Date **5/5/95**