

WELL DRILLER'S REPORT

Please complete this form in its entirety

NOTICE OF INTENT NO. **6269**

PRINT OR TYPE ONLY

1. OWNER **ARGO AM/PM**
MAILING ADDRESS

ADDRESS AT WELL LOCATION
DECATUR & WASHINGTON

2. LOCATION **NW 1/4 S42 1/4 Sec 30 T 20 N R 61 E** **CLARK** County
PERMIT NO. **M02055** Issued by Water Resources Parcel No. Subdivision Name

3. TYPE OF WORK
New Well Recondition Other
Deepen Other
4. Domestic Municipal
5. TYPE WELL
Cable Rotary Other

PROPOSED USE

NON/TEST

5. TYPE WELL

Cable Rotary Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
FILL		0	12'	12'
SILTY SAND		12'	17'	5'
CLAYEY GRAVEL		17'	20'	3'
CALICHE		20'	22'	2'
GRAVELLY CLAY		22'	30'	8'

8. WELL CONSTRUCTION
Diameter: **2** inches Total depth **30** feet

Casing record **15' BLANK, 15' SCREEN**
Weight per foot: Thickness:

Diameter	From	To
inches	feet	feet

Surface seal: Yes No Type **NEAT CEMENT** feet

Depth of seal: **3'** feet

Gravel packed: Yes No
Gravel packed from **3** feet to **30** feet

Perforations:

Type perforation **FACTORY SLOTTED**

Size perforation **15'** feet to **30'** feet
From: feet to feet
From: feet to feet
From: feet to feet
From: feet to feet

RECEIVED

APR 17 1991

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

Date started	Date completed
MARCH 25 1991	MARCH 25 1991

7. WELL TEST DATA

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

9. WATER LEVEL

Static water level **18.0'** feet below land surface
Flow: G.P.M. P.S.I.
Water temperature: °F Quality:

10. DRILLER'S CERTIFICATION

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

Name **DON WILSON** Contractor

Address **4670 S FAIRES LN, NV 89103** Contractor

Nevada contractor's license number

issued by the State Contractor's Board

Nevada contractor's driller's number

issued by the Division of Water Resources

Nevada driller's license number issued by the Division of Water Resources, the on-site driller **M1589**

Signed **Don Wilson** By driller performing actual drilling on site or contractor

Date:

BAILER TEST

G.P.M. Draw down: feet hours
G.P.M. Draw down: feet hours
G.P.M. Draw down: feet hours