

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 12099

1. OWNER **USPCI REMEDIAL SERVICES**

ADDRESS AT WELL LOCATION

MAILING ADDRESS **5665 FORT IRON PARKWAY
BOULDER, CO 80301**

**UNION PACIFIC RAILYARD
LAS VEGAS, NV**

2. LOCATION **SE 1/4 NE 1/4 Sec 33 T. 20 N. R. 66 E**

CUNRA County

PERMIT NO. **W-2047** Issued by Water Resources

Parcel No.

Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other.....

4. RWL Domestic Municipal/Industrial Irrigation Test Monitor Stock

5. WELL TYPE Cable Rotary RVC Air Other **AUGER**

LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
ASPHALT/FILL		0	3	3
SANDY SILT		3	15	12
CLAY		15	18	3
CALICHE		18	19.5	1.5
CLAY		19.5	28	8.5
CUNRA SAND		28	37	9
CLAY w/ GRAVEL		37	45	8

8. WELL CONSTRUCTION
Depth Drilled **45** Feet
HOLE DIAMETER (BIT SIZE)
From **10** Inches To **45** Feet
Inches. Feet. Feet. Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6		PVC	0	40

Perforations:
Type perforation **FACTORY SLOT**
Size perforation **0.020**
From **10** feet to **35** 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 **5-8' 6-8' BURRY**
Placement Method: Pumped Pellets Concrete Grout
 Gravel Packed: Yes No
From..... feet to..... feet **45** feet

9. WATER LEVEL
Static water level **20.85** feet below land surface
Artesian 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 **RICHARD LEBLANC / CONVERSE**
Contractor
Address **4670 S. POLARIS AVE.**
Contractor **LAS VEGAS, NV 89103**

Nevada contractor's license number **0034757**
issued by the State Contractor's Board
Nevada driller's license number issued by the Nevada Division of Water Resources, the on-site driller **M-1817**

Signed 
By driller performing actual drilling on site or contractor
Date **10/22/93**

Date started **8/13** 19**93**
Date completed **8/13** 19**93**

WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift
G.P.M. Draw Down (Feet Below Static) Time (Hours)

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)