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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. 14067

1. OWNER GEDFON ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 5070 Anville St SW-7 CECILS Market LAUREL, ND
LU NV 87119
 2. LOCATION S2 1/4 NW 1/4 Sec 13 T 32 NR 66 E WARK County _____
 PERMIT NO. NO-2438A Issued by Water Resources Parcel No. _____ Subdivision Name _____

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 Auger

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>poorly graded sand</u>		<u>0</u>	<u>20</u>	
<u>clay</u>		<u>20</u>	<u>22</u>	
<u>poorly graded sand</u>		<u>22</u>	<u>40</u>	
<u>gravel</u>		<u>40</u>	<u>41</u>	
<u>sand</u>		<u>41</u>	<u>43</u>	

8. WELL CONSTRUCTION
 Depth Drilled 43 Feet Depth Cased 43 Feet
 HOLE DIAMETER (BIT SIZE)
 From _____ To _____
7 Inches _____ Feet 43 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2.5</u>	<u>PVC</u>	<u>std 80</u>	<u>0</u>	<u>40</u>

Perforations:
 Type perforation slotted screen
 Size perforation .020
 From 40 feet to 43 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal 36
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 38 feet to 43 feet

9. WATER LEVEL
 Static water level 24 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 Weber Environmental Contractor
 Address 4301 S Valley View #21 Contractor
LU NV 89103
 Nevada contractor's license number issued by the State Contractor's Board 00 35639
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M1847
 Signed _____
 By driller performing actual drilling on site or contractor
 Date 3-20-95

Date started 2-29, 1995
 Date completed 2-29, 1995

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			

RECEIVED
 APR 3 1995
 Div. of Water Resources
 Branch Office - Las Vegas, NV