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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. 15921

1. OWNER NEIIS AFB 99 ABW ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS EMR 4349 DUFFER DR 5790 RICKENBACHER RD  
NEIIS AFB, NV 89191-7007 NEIIS AFB, NV 89191-7054  
 2. LOCATION NW 1/4 SE 1/4 Sec. 4 T. 20 N. 62 E. CLARK County  
 PERMIT NO. NA 140-04-801-001 Parcel No. \_\_\_\_\_ Subdivision Name NA

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 Rate Sonar

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Sand &amp; caliche</u>		<u>0</u>	<u>48</u>	<u>48</u>
<u>Sand &amp; gravel</u>		<u>48</u>	<u>50</u>	<u>2</u>
<u>Clay &amp; silt</u>		<u>50</u>	<u>55</u>	<u>5</u>
<u>Sand &amp; silt</u>		<u>55</u>	<u>58</u>	<u>3</u>
<u>SAND</u>		<u>58</u>	<u>63</u>	<u>5</u>
<u>Silty SAND</u>		<u>63</u>	<u>80</u>	<u>17</u>

8. WELL CONSTRUCTION  
 Depth Drilled 80 Feet Depth Cased 80 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From \_\_\_\_\_ To \_\_\_\_\_  
8.25 Inches 0 Feet 80 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4.5</u>	<u>2 lbs/ft</u>	<u>.394</u>	<u>0</u>	<u>80</u>

Perforations:  
 Type perforation slotted  
 Size perforation 0.020  
 From 40 feet to 80 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 39  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From 39 feet to 80 feet

9. WATER LEVEL  
 Static water level 41.3 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started November 16 1997  
 Date completed October 17 1997

7. WELL TEST DATA

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

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name ROBERT REEDY Contractor  
 Address 2773 W Seldow LN Contractor  
Peoria AZ 85345  
 Nevada contractor's license number issued by the State Contractor's Board 0010157  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 17-2071  
 Signed Robt Reedy  
 By driller performing actual drilling on site or contractor  
 Date 10-24-97