



PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

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. 15804

1. OWNER LLP ADDRESS AT WELL LOCATION On Market  
 MAILING ADDRESS 4420 S. Decatur S. 21st  
 2. LOCATION 5 2 N 12 Sec 13, 24 T 21 N 30 E County  
 PERMIT NO. DW 1039 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 Log

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Concreted Drift</u>		<u>0</u>	<u>8</u>	<u>8</u>
<u>Caliche</u>		<u>8</u>	<u>18</u>	<u>10</u>
<u>Swartz + clay</u>		<u>18</u>	<u>50</u>	<u>22</u>

8. WELL CONSTRUCTION  
 Depth Drilled 50 Feet Depth Cased 50 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 24 Inches To 0 Feet 50 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8</u>	<u>12</u>	<u>5/16</u>	<u>0</u>	<u>50</u>

Perforations:  
 Type perforation slot  
 Size perforation 30-003  
 From 30 feet to 50 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Neat Cement  
 Cement Grout  
 Concrete Grout  
 Depth of Seal \_\_\_\_\_  
 Placement Method:  Pumped  Poured  
 Gravel Packed:  Yes  No  
 From 0 feet to 50 feet

9. WATER LEVEL  
 Static water level: 30 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature 60 °F Quality good

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Name A.C.D. Contractor  
 Address 536 E. Mitchell Contractor  
 Nevada contractor's license number 2531246  
 issued by the State Contractor's Board  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-1968  
 Signed [Signature]  
 By driller performing actual drilling on site or contractor  
 Date 1-19-96

Date started 1-19 1996  
 Date completed 1-19 1996

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			

