

OFFICE USE ONLY
 Log No. **78053**
 Permit No. **230**
 Basin **I**

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. **17789**

1. OWNER **Todd Hassler** ADDRESS AT WELL LOCATION **East end Sage Ranch**
 MAILING ADDRESS **Palumbo NV 89041** **36-088** **Amargosa Valley, NV 89020**
 2. LOCATION **NW 1/4 NE 1/4 Sec. 16 T. 16 N. R. 44 E. 11th** County
 PERMIT NO. **19-201-14** **File Map # 143051**

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 **Mud**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Top Soil + Sand		0	30	30
Cemented Sand + gravel		30	50	20
Clay + Gravel		50	80	30
Limestone		80	90	10
Beakal Clay		90	113	23
Smilky Clay	1st	113	125	12
Beakal Clay + Sand		125	185	60
Sand + Small Gravel	2nd	185	195	10
Gravel		195	200	5
Bottom of Hole				200'

8. WELL CONSTRUCTION
 Depth Drilled **200'** Feet Depth Cased **200'** Feet
 HOLE DIAMETER (BIT SIZE)
 From **1 1/4** Inches To **200'** Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8" PVC			0	200'
Surface Protective Casing				
1" of 10" Steel 1808 Wall				

Perforations:
 Type perforation **Mud**
 Size perforation **3" x 1/2 every 12"**
 From **140'** feet to **200'** feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal **50'** Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From **50'** feet to **200'** feet

9. WATER LEVEL
 Static water level **127'** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **cool** °F Quality **Good**

Date started **August 18** 19**99**
 Date completed **August 20** 19**99**

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			

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name **Cook Drilling** Contractor
 Address **HC 19 Box 450** Contractor
Amargosa Valley, NV 89020
 Nevada contractor's license number issued by the State Contractor's Board **5376-A**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **830**
 Signed **Dave Prave**
 By driller performing actual drilling on site or contractor
 Date **August 25 1999** **1-6-00**