

OFFICE USE ONLY
 Log No. **78602**
 Permit No. **162**
 Basin **162**

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. **19326**

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

1. OWNER GENE HARDENIA ADDRESS AT WELL LOCATION 1640 W. AMARILLO AVENUE
 MAILING ADDRESS _____
 2. LOCATION NE 1/4 SW 1/4 Sec. 29 T. 20-S N/S R. 53 E. NYE County _____
 PERMIT NO. 40-251-24 CALVADA VALLEY, UT:5, BK:4
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 _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
SURFACE		0	4	4
GRAY CLAY		4	38	34
GRAY CLAY/CALICHE		38	59	21
GRAY CLAY	X	59	86	27
BROWN CLAY/CALICHE		86	110	24
BROWN CLAY	X	110	135	25
BROWN CLAY/CALICHE		135	168	33
BROWN CLAY		168	184	16
BROWN CLAY/CALICHE	X	184	200	16

8. WELL CONSTRUCTION
 Depth Drilled 200 Feet Depth Cased 200 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
12 Inches 0 Feet 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 5/8	16.94	.188	0	200

Perforations:
 Type perforation TORCH CUT
 Size perforation 1/4" WIDTH 8" LONG
 From 160 feet to 200 feet
 From _____ feet to _____ feet
 From _____ feet to _____ 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 58 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started JANUARY 3, 2000
 Date completed JANUARY 3, 2000

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 checked="" type="checkbox"/> Air Lift	<u>20</u>	<u>4</u>	<u>1/4</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name JIM PIKE WELL DRILLING, LLC. Contractor
 Address P.O. BOX 56 PAHRUMP, NV 89041 Contractor
 Nevada contractor's license number issued by the State Contractor's Board 17563A
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1812
 Signed [Signature] By driller performing actual drilling on site or contractor
 Date JANUARY 24, 2000

