

OFFICE USE ONLY  
 Log No. 80777  
 Permit No. 212  
 Basin 212  
 NOTICE OF INTENT NO. 20332

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

1. OWNER Country ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS CU NV

2. LOCATION 1/4 Sec 3+5 T 21 N 36 2 E 116 2 County \_\_\_\_\_  
 PERMIT NO. DLW 1116 Issued by Water Resources Parcel No. 1161-05-512-073 Subdivision Name \_\_\_\_\_

3. WORK PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Abandon  Other \_\_\_\_\_  
 4. PROPOSED USE dewater WELL TYPE  
 Domestic  Irrigation  Test  Cable  Rotary  RVC  
 Municipal/Industrial  Monitor  Stock  Air  Other Bucket

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Dirt + Sand</u>		<u>0</u>	<u>4</u>	
<u>Clay w/ sand</u>		<u>4</u>	<u>13</u>	
<u>Silty Sand</u>		<u>13</u>	<u>23</u>	
<u>Silty Clay</u>		<u>23</u>	<u>35</u>	

9 wells in this parcel from layout to flank

8. WELL CONSTRUCTION  
 Depth Drilled 35 Feet Depth Cased 35 Feet  
 HOLE DIAMETER (BIT SIZE)  
24 Inches From 0 Feet To 35 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>PVC</u>	<u>sch 40</u>	<u>0</u>	<u>35</u>

Perforations: PVC Slot  
 Type perforation \_\_\_\_\_  
 Size perforation 0.30  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From 10 feet to 35 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ 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 35 feet

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

Date started 8-7-24, 19\_\_\_\_\_  
 Date completed 7-8-25, 19\_\_\_\_\_  
 7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  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 GDL  
 Address 536 E Whitland  
Ontario CA  
 Nevada contractor's license number 31246  
 issued by the State Contractor's Board  
 Nevada driller's license number issued by the M1968  
 Division of Water Resources, the on-site driller  
 Signed [Signature]  
 By driller performing actual drilling on site or contractor  
 Date 8-14-0