

PRINT OR TYPE ONLY  
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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. 20486

1. OWNER Bob DeMino ADDRESS AT WELL LOCATION 1600 N Decatur  
7 - E. W. Stark  
 MAILING ADDRESS 10220 SW Greenbary  
Rd Portland OR 97223  
 2. LOCATION SW 1/4 SW 1/4 Sec 19 T 22 N/S R. 61 E N.D.B.V. Clark County  
 PERMIT NO. 137-19401-006 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 HSW

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Asphalt 2"				
Gravel layer				
Sand Silty Clay fine sand clay				
Med. grained sand coarse gravel		7		
Gravelly sand trace of clay Sandy silt			11	
Silty Clay Gravel Dump				
TD 14			11 14	

8. WELL CONSTRUCTION  
 Depth Drilled 14 Feet Depth Cased 4 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 10" Inches 0 Feet 14 Feet  
 To 14 Feet  
 Inches Feet Feet  
 Inches Feet Feet  
 Inches Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4"			4	0

Perforations:  
 Type perforation perc. screen  
 Size perforation 1/2"  
 From 14 feet to 4 feet  
 From feet to feet  
 From feet to feet  
 From feet to feet  
 From feet to feet  
 Surface Seal:  Yes  No Seal Type:  
 Neat Cement  
 Cement Grout  
 Concrete Grout  
 Depth of Seal 3  
 Placement Method:  Pumped  Poured  
 Gravel Packed:  Yes  No  
 From 14 feet to 3 feet

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

Date started 4/18/00 19  
 Date completed 4/18/00 19

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 THE Dr. Hing Contractor  
 Address 9931 Lesenda Ave  
Fontana CA 92335 Contractor  
 Nevada contractor's license number 8045899  
 issued by the State Contractor's Board.  
 Nevada driller's license number issued by the M1747-T1  
 Division of Water Resources, the on-site driller.  
 Signed [Signature]  
 By driller performing actual drilling on site or contractor  
 Date 4-18-00