

31506
 OFFICE USE ONLY
 Log No. 5149
 Permit No. _____
 Basin 212

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. 20332

1. OWNER Conti Const. ADDRESS AT WELL LOCATION On Arden Ave
 MAILING ADDRESS LU NV Acme Colo to Charleston

2. LOCATION 1/4 1/4 Sec. 5 T. 21 N. 62 E County _____
 PERMIT NO. DW1116 K-1-64-219-000 Parcel No. _____ Subdivision Name _____
 Issued by Water Resources

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other _____
 4. ~~Domestic~~ PROPOSED USE
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock
 5. WELL TYPE
 Cable Rotary RVC
 Air Other Drill

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Asphalt	0	6"		
Type 2	6"	3		
Sandy Clay	3	25		
Clay	25	28		
Clay w/ Sand lenses	28	35		
Total of 13 wells in this Parcel				

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

 Perforations:
 Type perforation Slot
 Size perforation .032
 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
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 0 feet to 35 feet
 9. WATER LEVEL
 Static water level 12 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 10-11 19____
 Date completed 10-12 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 Clinton Dauterive Contractor
 Address 536 E. Mitchell Contractor
Ontario CA
 Nevada contractor's license number 31246
 issued by the State Contractor's Board
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M1968
 Signed _____
 By driller performing actual drilling on site or Contractor
 Date 10-31-0