

OFFICE USE ONLY
 Log No. **82834**
 Permit No. _____
 Basin **163**

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. **21702**

1. OWNER **JOHN + PEGGY ELLENBURG** ADDRESS AT WELL LOCATION **LEAD AVE. & SANTEE ST.**
 MAILING ADDRESS **SANDY VALLEY AVE CLARK**

2. LOCATION **SE 1/4 NW 1/4 Sec. 26 T. 24 N/S R. 56 E** County **CLARK**
 PERMIT NO. **200-26-201-004** 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
CLAY		0	15	15
CALICHE		15	19	4
CLAY		19	44	25
CALICHE		44	50	6
CLAY		50	64	14
CALICHE		64	68	4
CLAY		68	79	11
CALICHE	W.B	79	83	4
CLAY		83	96	13
CALICHE	W.B	96	102	6
CLAY		102	128	26
CALICHE	W.B	128	137	9
CLAY		137	140	3

8. WELL CONSTRUCTION
 Depth Drilled **140** Feet Depth Cased **140** Feet

HOLE DIAMETER (BIT SIZE)
 From **10 5/8** Inches To **140** Feet
 Inches Feet Feet Feet
 Inches Feet Feet Feet
 Inches Feet Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	4.33	.316	0	140

Perforations:
 Type perforation **SAW CUT**
 Size perforation **1 INCH BY 3 INCH**
 From **140** feet to **100** feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal **50** Neat Cement
 Placement Method: Pumped Concrete Grout
 Poured

Gravel Packed: Yes No
 From **140** feet to **50** feet

9. WATER LEVEL
 Static water level **68** feet below land surface
 Artesian flow _____ G.P.M. P.S.I.
 Water temperature **COOL** °F Quality _____

Date started **5-2** **2001**
 Date completed **5-3** **2001**

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 **Budget Drilling Co** Contractor
 Address **P.O. Box 3505 Primm NV 89041** Contractor
 Nevada contractor's license number **40020** issued by the State Contractor's Board
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1573**
 Signed **Thom Brown**
 By driller performing actual drilling on site or contractor
 Date **5-7-2001**

