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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. 19574

1. OWNER Ree Brinkerhoff
 MAILING ADDRESS PO Box 130 Moapa NV 89025

ADDRESS AT WELL LOCATION Moapa NV #1 Essy Street

2. LOCATION N/W 1/4 N/W 1/4 Sec. 2 T. 15 N. R. 66 E. Clark

PERMIT NO. 65761 Issued by Water Resources
1042-02-101-007-01 Parcel No.

Subdivision Name _____ Count _____

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
TOP Seal		0	18	18
clay-Grauel	X	18	70	52
gravel-Boulders	X	70	90	20
clay-Boulders	X	90	105	15
Hard Rock		105	132	27
Fractured Rock		132	136	4
Hard Rock		136	165	29
Fractured Rock		165	190	15

8. WELL CONSTRUCTION
 Depth Drilled 190 Feet Depth Cased 190 Feet

HOLE DIAMETER (BIT SIZE)
 From 12 1/4 Inches To 190 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 1/2</u>		<u>Sch 40</u>	<u>0</u>	<u>190</u>

Dry hole Because 100' of Grout Sealed off all water

Perforations:
 Type perforation screen
 Size perforation 1/32
 From 110 feet to 190 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 100' Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 100 feet to 190 feet

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

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Davis Drilling and Pumps Contractor
 Address HC 61 Box 54 Hiko NV 89017 Contractor

Date started 1-17-01 19____
 Date completed 2-3-01 19____

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input checked="" type="checkbox"/> Pump <input type="checkbox"/> Air Lift	<u>0</u>		

Nevada contractor's license number issued by the State Contractor's Board 0078266
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1191
 Signed Mike Jai
 By driller performing actual drilling on site or contractor
 Date 2-5-01