WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

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

OFFICE USE ONLY
Log No. 90215
Permit No. 38285
Basin 161

NOTICE OF INTENT NO. 25253

1. OWNER Hilda Wagner
MAILING ADDRESS 455 Clark Ln
Indian Springs, NV

ADDRESS AT WELL LOCATION 455 Clark Ln
Indian Springs NV

2. LOCATION SE ¼ NE ¼ Sec. 8 T. 16 N/S R. 56 E. County
PERMIT NO. #38285 (Issued by Water Resources) 059-08-610-124 (Parcel No.) Oasis Trailer Park (Subdivision Name)

3. WORK PERFORMED
☐ New Well ☐ Replace ☐ Recondition
☐ Deepen ☒ Abandon ☐ Other

4. PROPOSED USE Commercial
☐ Domestic ☐ Irrigation ☐ Test
☐ Municipal/Industrial ☐ Monitor ☐ Stock

WELL TYPE
☐ Cable ☐ Rotary ☐ RVC
☐ Air ☐ Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Pull pump from well				
Perforate casing to surface perforations are 3" long by 3/8" wide 4 times per foot				
Abandon well from bottom to top w/neat cement, 24 sac				
Supplied by Tanker and pumped by Bedrock pumpers through				
Tremmie hose measuring 2" x 0.054 manufactured by Sunflow Inc.				
Code ST-10				

Date started 7/1, 2003
Date completed 7/3, 2003

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

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

HOLE DIAMETER (BIT SIZE)

	From	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)

Perforations:
Type perforation
Size perforation
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

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

Gravel Packed: ☐ Yes ☐ No
From ____ feet to ____ 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 Eagle Drilling (Contractor)
Address 7150 Placid (Contractor)
Las Vegas, NV 89119
Nevada contractor's license number issued by the State Contractor's Board 51266
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2202
Signed [signature] (By driller performing actual drilling on site or contractor)
Date 9-3-05

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(Rev. 12-01)

USE ADDITIONAL SHEETS IF NECESSARY

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