

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. **27011**

1. OWNER **Scott Jahnel** ADDRESS AT WELL LOCATION \_\_\_\_\_  
MAILING ADDRESS **HC 69 Box 500** **1742 W. Old West rd.**  
**Amargosa Valley, NV. 89020** **Amargosa Valley, NV. 89020**  
2. LOCATION **NE 1/4 NE 1/4 Sec. 10 T. 16 N. R. 48 E. Nye** County  
PERMIT NO. **19-051-53** Subdivision Name \_\_\_\_\_  
Issued by Water Resources Parcel No. \_\_\_\_\_

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  RVG  
 Air  Other **mu**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
gravel w/ sand		0	130	130
gravel	1st	130	155	25
limestone		155	170	15
tan clay		170	190	20
sand w/ gravel	2nd	190	210	20
white clay w/ sand layers		210	240	30
Bottom of well			240	

OWNER RECEIVED  
MAY 02 2005  
LAS VEGAS OFFICE

8. WELL CONSTRUCTION  
Depth Drilled **240** Feet Depth Cased **240** Feet  
HOLE DIAMETER (BIT SIZE)  
From **12 1/4** Inches To **0** Feet **240** Feet  
Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>6</b>	<b>PVC</b>		<b>0</b>	<b>240</b>
<b>8</b>	<b>Steel</b>	<b>.188</b>	<b>0</b>	<b>7</b>

Perforations:  
Type perforation **Machined**  
Size perforation **GR, .032 screen**  
From **135** feet to **175** feet  
From **195** feet to **215** feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  Neat Cement  
Depth of Seal **50**  Cement Grout  
Placement Method:  Pumped  Concrete Grout  
 Poured  
Gravel Packed:  Yes  No  
From **50** feet to **240** feet

9. WATER LEVEL  
Static water level **129** feet below land surface  
Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started **4/4**, 2005  
Date completed **4/6**, 2005

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 **Cook Drilling Co** Contractor  
Address **HC 70 Box 543** Contractor  
**Amargosa Valley, NV. 89020**  
Nevada contractor's license number issued by the State Contractor's Board **5376-A**  
Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2160**  
Signed **Ray Johnson**  
By driller performing actual drilling on site or contractor  
Date **4/28/05**