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

003618

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

4 wells

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. 102 101
Permit No.
Basin 205

NOTICE OF INTENT NO. 30668

1. OWNER WARREN EIZMAN
MAILING ADDRESS 350 FRONT ST, CALIENTE NV
ADDRESS AT WELL LOCATION 350 FRONT ST, CALIENTE, NV

2. LOCATION SW ¼ NW ¼ Sec. 8 T. 04 N R. 67 E LINCOLN County
PERMIT NO. (Issued by Water Resources) 308904 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	Thickness
PULLED CASING				
FILLED FROM BOTTOM				
TO TOP WITH				
BENTONITE CHIPS				
CEMENT SEAL				
ON TOP				
MAP DATUM				
WGS 84				
SP1 37°36.950N 114°30.801	W			
SP2 37°36.851N 114°30.805	W			
SP3 37°36.855N 114°30.807	W			
SP4 37°36.857N 114°30.803	W			

DONE/DWR
RECEIVED
JAN 12 2007
LAS VEGAS OFFICE

Date started 01/08, 2007
Date completed 01/08, 2007

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 SERVICES LLC (Contractor)
Address 7150 PLACID ST (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 M-2272
Signed (By driller performing actual drilling on site or contractor)
Date 01/11/07

(Rev. 12-01) USE ADDITIONAL SHEETS IF NECESSARY (O)-627