



WELL DRILLER'S REPORT

Please complete this form in its entirety

NOTICE OF INTENT NO. 0821

PRINT OR TYPE ONLY

1. OWNER Guy Jack James ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS _____

2. LOCATION SE 1/4 SE 1/4 Sec 16 T 20 S N/S R 53 E Nye County

PERMIT NO. _____ Issued by Water Resources Parcel No. _____ Subdivision Name _____

3. TYPE OF WORK
 New Well Recondition
 Deepen Other
 4. PROPOSED USE
 Domestic Irrigation Test
 Municipal Industrial Stock
 5. TYPE WELL
 Cable Rotary
 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Hard pan		0	4	4
popcorn shale		4	12	8
Clay		12	57	45
Clay clechia	X	57	61	4
Clay		61	97	36
Clay clechia	X	97	101	4
Clay		101	137	36
Clay clechia	X	137	141	4
Clay blk gravel		141	160	19

8. WELL CONSTRUCTION
 Diameter 12 1/4 inches Total depth 160 feet
 _____ inches
 _____ inches
 Casing record 8 5/8 X 160'
 Weight per foot 14.50 Thickness 153
 Diameter From To
8 5/8 inches 0 feet 160 feet
 _____ inches _____ feet _____ feet
 Surface seal: Yes No Type Cement
 Depth of seal 50 feet
 Gravel packed: Yes No
 Gravel packed from 50 feet to 160 feet
 Perforations:
 Type perforation Torch
 Size perforation 1/8 X 6" 2 Rows
 From 120 feet to 160 feet
 From _____ feet to _____ feet

RECEIVED
 NOV 03 1987
 Division of Water Resources
 Office - Las Vegas, NV

Date started 8-29- 1979
 Date completed 8-30- 1979

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump

9. WATER LEVEL
 Static water level 50 feet below land surface
 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 Custom Drilling Inc Contractor
 Address 4425 Stacey Ave L.V. NV Contractor
 Nevada contractor's license number issued by the State Contractor's Board 19219
 Nevada contractor's driller's number issued by the Division of Water Resources _____
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1081
 Signed R. H. Loepel
 By driller performing actual drilling on site or contractor
 Date 11-1-87

BAILER TEST
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours