

STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

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

OFFICE USE ONLY
 Log No. **44210**
 Permit No. _____
 Basin _____

NOTICE OF INTENT NO. **10457**

1. OWNER **Tom Steele** ADDRESS AT WELL LOCATION **End of North Broadway Street**
 MAILING ADDRESS **General Delivery, Alamo Nev. 89001**
 2. LOCATION **N/W 1/4 N/W 1/4 Sec 5 T 7 NR 61 E Lincoln** County
 PERMIT NO. _____ Issued by Water Resources 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
TOP SOIL		0	2	2
sand-boulders		2	25	18
Cemented gravel		25	57	32
Coarse sand	X	57	63	6
Clay-sand		63	73	10
clay		73	76	3

TD 76'

8. WELL CONSTRUCTION
 Depth Drilled **76** Feet Depth Cased **76** Feet
 HOLE DIAMETER (BIT SIZE)
 From **10 5/8** Inches To **0** Feet **76** Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	0	.188	0	76

 Perforations:
 Type perforation **factory**
 Size perforation **1/8" V 3"**
 From **56** feet to **76** feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal **51** Neat Cement
 Placement Method: Pumped Concrete Grout
 Poured
 Gravel Packed: Yes No
 From **51** feet to **76** feet

RECEIVED
 APR 7 1994
 Div. of Water Resources
 Branch Office - Las Vegas, NV

9. WATER LEVEL
 Static water level **50** feet below land surface
 Artesian flow **0** G.P.M. **0** P.S.I.
 Water temperature **cold** °F Quality **good**

Date started **9-27-93**, 19____
 Date completed **9-30-93**, 19____

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
28	5	3

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** Contractor
 Address **P.O. Box 54 Hiko Nev. 89017** Contractor
 Nevada contractor's license number issued by the State Contractor's Board **0028966**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1191**
 Signed **Mike D. Davis**
 By driller performing actual drilling on site or contractor
 Date **11/4/93**