

Log No. 52923
 Permit No. _____
 Basin 212



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 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. 8395

1. OWNER William + Joyce Morris ADDRESS AT WELL LOCATION W JO RAY
 MAILING ADDRESS + Industrial
3370 W JO RAY AVE
 2. LOCATION SE 1/4 NW 1/4 Sec. 29 T. 22 N/S R. 61 E Clark County
 PERMIT NO. 17729203003 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	Thick-ness
<u>Sand Gravel Boulders</u>		<u>0</u>	<u>75</u>	
<u>Red Sand Stone</u>		<u>75</u>	<u>100</u>	
<u>Sand Gravel Boulders</u>		<u>100</u>	<u>155</u>	
<u>Red Sand Stone</u>	<u>5</u>	<u>155</u>	<u>215</u>	
<u>Sand Gravel Boulders</u>	<u>15</u>	<u>215</u>	<u>255</u>	
<u>Red Sand Stone</u>		<u>255</u>	<u>265</u>	
<u>Sand Gravel</u>	<u>20</u>	<u>265</u>	<u>320</u>	
<u>Red Sand Stone</u>		<u>320</u>	<u>330</u>	
<u>Sand Gravel Boulders</u>	<u>40</u>	<u>330</u>	<u>385</u>	

8. WELL CONSTRUCTION
 Depth Drilled 385 Feet Depth Cased 380 Feet

HOLE DIAMETER (BIT SIZE)
 From 12 1/4 Inches To 0 Feet 385 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8 7/8</u>	<u>17 1/2</u>	<u>1 7/8</u>	<u>0</u>	<u>380</u>

Perforations:
 Type perforation JORK
 Size perforation 7/8
 From 320 feet to 380 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 50 FEET Neat Cement
 Placement Method: Pumped Concrete Grout
 Poured

Gravel Packed: Yes No
 From 50 feet to 380 feet

9. WATER LEVEL
 Static water level 165 feet below land surface
 Artesian flow N/O G.P.M. _____ P.S.I. _____
 Water temperature 60.1 °F Quality Good

Date started 4-25 1996
 Date completed 4-30 1996

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>40</u>		

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge
 Name Reedling Drilling Contractor
 Address 8170 S Haven
h.u. NV 89123 Contractor
 Nevada contractor's license number issued by the State Contractor's Board 38155
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1798
 Signed Manuel I. K... A
 By driller performing actual drilling on site of contractor
 Date 5-3-96