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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. 33150

1. OWNER Fred Clarkson ADDRESS AT WELL LOCATION Opal & Flood 2005  
 MAILING ADDRESS 38 NW 8942  
 2. LOCATION NW 1/4 SW 1/4 Sec. 23 T. 18 N/S R 24 County \_\_\_\_\_  
 PERMIT NO. 18-062-02 Parcel No. \_\_\_\_\_  
 Issued by Water Resources \_\_\_\_\_ Subdivision Name Ramsley #2

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 Mod

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Boulders Sands</u>		<u>0</u>	<u>3</u>	<u>3</u>
<u>Gravel Boulders</u>		<u>3</u>	<u>23</u>	<u>20</u>
<u>Sand</u>		<u>23</u>	<u>33</u>	<u>10</u>
<u>Clay Bldg</u>		<u>33</u>	<u>296</u>	<u>263</u>
<u>Clay Grey</u>		<u>296</u>	<u>310</u>	<u>14</u>
<u>Gravel</u>		<u>310</u>	<u>390</u>	<u>80</u>
<u>Clay</u>		<u>390</u>	<u>397</u>	<u>7</u>

8. WELL CONSTRUCTION  
 Depth Drilled 397 Feet Depth Cased 398 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From To  
10 3/8 Inches 1 Feet 60 Feet  
9 1/4 Inches 60 Feet 397 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 CASING SCHEDULE  

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 3/8</u>	<u>13</u>	<u>1.88</u>	<u>1</u>	<u>397</u>

Perforations:  
 Type perforation Taper cut  
 Size perforation 3/16 x 6 x 26  
 From 376 feet to 396 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 80'  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

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 07 NOV 14 AM 11:06  
 STATE ENGINEERS OFFICE

9. WATER LEVEL  
 Static water level: 159 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature C °F Quality Good

Date started 10-22-97, 19\_\_\_\_  
 Date completed 10-31-97, 19\_\_\_\_

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>20-25</u>		<u>5 hrs</u>

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name Jason Driller Inc Contractor  
 Address PO. 893  
38 NW 8942  
 Nevada contractor's license number issued by the State Contractor's Board: 0031841  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller: 15276  
 Signed Jason Driller  
 By driller performing actual drilling on site or contractor  
 Date 11-3-97