

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

OFFICE USE ONLY
 Log No. **72970**
 Permit No. _____
 Basin **162**

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

NOTICE OF INTENT NO. **4819**

1. OWNER **Hector and Veronica Aguilar** ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS **6480 S. Conestoga Parkway** **6480 S. Conestoga Parkway**
Pahrump, NV 89048

2. LOCATION **NE 1/4 SW 1/4 Sec. 13 T 21S** N/S **R 53E** E **Nye** County
 PERMIT NO. **44-582-11** Parcel No. _____ Subdivision Name **Conestoga Country Estates**
 Issued by Water Resources _____

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
brown sandy loam		0	25	25
light brown calache		25	28	3
light borwn loam		28	52	24
grey sandy loam		52	62	10
light brown loam	x	62	98	36
light brown loam	x	98	123	25
light brown calache	x	123	124	1
light brown calache	x	124	137	13
light borwn calache	x	137	140	3

8. WELL CONSTRUCTION
 Depth Drilled **140** Feet Depth Cased **140** Feet

HOLE DIAMETER (BIT SIZE)
 From To
11 Inches **0** Feet **140** 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	3.7	.280	0	140

Perforations:
 Type perforation **sawcut**
 Size perforation **.188**

From **110** feet to **140** feet
 From _____ feet to _____ feet

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

Gravel Packed: Yes No
 From **50** feet to **140** feet

9. WATER LEVEL
 Static water level **62** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **cold** °F Quality **good**

Date started **12/4/98** 19____
 Date completed **12/4/98** 19____

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	.5	na	.50

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Name **Strickland Construction Co., Inc.** Contractor
 Address **2301 Winery Road, Suite 2** Contractor
Pahrump, NV 89048

Nevada contractor's license number issued by the State Contractor's Board **40277**

Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2086**

Signed *Randy Strickland*
 By driller performing actual drilling on-site of contractor
 Date **12-21-98**

