

PRINT OR TYPE ONLY
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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. **19931**

1. OWNER **Nye County Public Works** ADDRESS AT WELL LOCATION **Amargosa Valley**
MAILING ADDRESS **P.O. Box 887** **Landfill State Hwy 373**
Tonopah, Nevada 89049

2. LOCATION **NW 1/4 SW 1/4 Sec. 25 T. 16 N. R. 49 E. Nye** County
PERMIT NO. **BLM Land** **Amargosa Valley Landfill** 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 **Auger**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Sandy silt with gravel	No	0'	15'	15'
Clayey sand with gravel and small caliche layers	No	15'	40'	25'
Sandy silt with gravel	No	40'	60'	20'
Poorly graded sand with clay & gravel	No	60'	80'	20'
Clayey sand	No	80'	100'	20'
Partly graded sand with clay & gravel	No	100'	135'	35'
Coarse sand wet	Yes	135'	141'	6'
Moderately graded sand	No	141'	145'	4'

8. WELL CONSTRUCTION **144**
Depth Drilled **145** Feet Depth Cased **145** Feet

HOLE DIAMETER (BIT SIZE)
From 8 Inches To 0 Feet **145** Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2"		Sch 40	0	129'

Perforations: **Factory slot**
Type perforation
Size perforation **.020**
From **129'** feet to **144'** feet

Surface Seal: Yes No Seal Type: Neat Cement
Depth of Seal **0'-118'** Cement Grout
Placement Method: Pumped **Bentonite** Concrete Grout
 Poured **(118'-124') (144'-145')**

Gravel Packed: Yes No
From **124** feet to **144** feet

Date started **10-27**, 19 **98**
Date completed **10-28**, 19 **98**

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 type="checkbox"/> Air Lift			

9. WATER LEVEL
Static water level **136'** feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature **<85** °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 **Haz-Tech Drilling** Contractor
Address **P.O. Box 940** Contractor
Meridian, Id. 83680
Nevada contractor's license number issued by the State Contractor's Board **0038018**
Nevada driller's license number issued by the Division of Water Resources, the on-site driller **M-1803**
Signed **Scott**
By driller performing actual drilling on site or contractor
Date **10-28-98**