

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. **19271**

1. OWNER **SALVADORE CERVANTES** ADDRESS AT WELL LOCATION **MABLE AV. + PAWNEE ST.**
MAILING ADDRESS _____ **SANDY VALLEY**
2. LOCATION **SUB NE 1/4 SE 1/4 Sec. 26 T. 24 N. 56 E. CLARK** County
PERMIT NO. **200-26-701-016** 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
SANDY LOAM		0	2	2
CALICHE		2	4	2
CLAY		4	28	24
CALICHE		28	38	10
CLAY		38	56	18
CALICHE		56	61	5
CLAY		61	74	13
CALICHE	W.B	74	80	6
CLAY		80	91	11
CALICHE	W.B	91	103	12
CLAY		103	118	15
CALICHE	W.B	118	126	8
CLAY		126	134	8
CALICHE	W.B	134	138	4
CLAY		138	140	2

8. WELL CONSTRUCTION
Depth Drilled **140** Feet Depth Cased **140** Feet
HOLE DIAMETER (BIT SIZE)
From **12 1/4** Inches To **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	4.33	.316	0	140

Perforations:
Type perforation **FACTORY SCREEN**
Size perforation **1/2 INCH BY 3 INCH**
From **120** feet to **100** feet
From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
Depth of Seal **50** Neat Cement
Placement Method: Pumped Poured Cement Grout Concrete Grout
Gravel Packed: Yes No
From **140** feet to **50** feet

9. WATER LEVEL
Static water level **63** feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature **COOL** °F Quality _____

Date started **7-15** 19 **99**
Date completed **7-21** 19 **99**

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			

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name **BUDGET DRILLING CO** Contractor
Address **P.O. Box 3505** Contractor
PAHRUMP NV. 89041
Nevada contractor's license number **40020** issued by the State Contractor's Board.
Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1573**
Signed **[Signature]**
By driller performing actual drilling on site or contractor
Date **8-5-99**