

OFFICE USE ONLY  
 Log No. 79088  
 Permit No. \_\_\_\_\_  
 Basin 212

PRINT OR TYPE ONLY  
 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. 20312

1. OWNER Centri Construction ADDRESS AT WELL LOCATION N. 28 TRAMPANA  
 MAILING ADDRESS LU NV Hollywood

2. LOCATION  $\frac{1}{4}$  23  $\frac{1}{4}$  Sec. 21 NSR02 E County \_\_\_\_\_  
 PERMIT NO. DW 110 161-23-301-001 Subdivision Name \_\_\_\_\_  
Issued by Water Resources Parcel No.

3. WORK PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Abandon  Other \_\_\_\_\_  
 4. PROPOSED USE Dewater  
 Domestic  Irrigation  Test  
 Municipal/Industrial  Monitor  Stock  
 5. WELL TYPE  
 Cable  Rotary  RVC  
 Air  Other Bucket

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Total of 36 wells drilled in this parcel</u>				
<u>Dry dirty sand</u>		<u>0</u>	<u>4</u>	
<u>Sandy clay</u>		<u>4</u>	<u>23</u>	
<u>Sand + gravel</u>		<u>23</u>	<u>27</u>	
<u>Blue clay</u>		<u>27</u>	<u>30</u>	

8. WELL CONSTRUCTION  
 Depth Drilled 30 Feet Depth Cased 30 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 24 Inches To 30 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</u>	<u>PVC</u>	<u>Sch 40</u>	<u>0</u>	<u>40</u>

Perforations:  
 Type perforation Slot  
 Size perforation .032  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From 10 feet to 30 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Neat Cement  
 Cement Grout  
 Concrete Grout  
 Depth of Seal \_\_\_\_\_  
 Placement Method:  Pumped  Poured  
 Gravel Packed:  Yes  No  
 From 0 feet to 30 feet

9. WATER LEVEL  
 Static water level 5 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °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 Griffin Ostering Contractor  
 Address 536 E. Mainland Contractor  
Ontario CA 91761  
 Nevada contractor's license number 31246  
 issued by the State Contractor's Board  
 Nevada driller's license number issued by the Division of Water Resources the on-site driller M 1968  
 Signed [Signature]  
 By driller performing actual drilling on site or contractor  
 Date 2-2-0

Date started 1-13, 190  
 Date completed \_\_\_\_\_, 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 type="checkbox"/> Air Lift			