

OFFICE USE ONLY
 Log No. 82402
 Permit No. _____
 Basin 162

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. 19117

1. OWNER Williams ADDRESS AT WELL LOCATION 4311 Assay Ln.
 MAILING ADDRESS 4311 Assay Ln.

2. LOCATION SW 1/4 SE 1/4 Sec. 11 T. 19 N. R. 52 E Nye County
 PERMIT NO. 11-624-02 Golden Springs Ranch Unit 8 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	Thick-ness
<u>brown clay</u>		<u>0</u>	<u>10'</u>	<u>10'</u>
<u>white clay</u>		<u>10'</u>	<u>20'</u>	<u>10'</u>
<u>brown clay</u>		<u>20'</u>	<u>25'</u>	<u>5'</u>
<u>green clay</u>		<u>25'</u>	<u>35'</u>	<u>10'</u>
<u>brown clay</u>		<u>35'</u>	<u>60'</u>	<u>25'</u>
<u>green clay</u>		<u>60'</u>	<u>70'</u>	<u>10'</u>
<u>brown clay</u>		<u>70'</u>	<u>80'</u>	<u>10'</u>
<u>green clay</u>		<u>80'</u>	<u>100'</u>	<u>20'</u>
<u>brown clay</u>		<u>100'</u>	<u>140'</u>	<u>40'</u>

8. WELL CONSTRUCTION
 Depth Drilled 140 Feet Depth Cased 140 Feet
 HOLE DIAMETER (BIT SIZE)
 From 0 Feet To 140 Feet
12 Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6.625</u>	<u>4.33</u>	<u>.316</u>	<u>0</u>	<u>140</u>

Perforations:
 Type perforation Saw cut
 Size perforation 1/8" x 3"
 From 100 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 49 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started February 26 2001
 Date completed February 28 2001

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Lakue Construction Co. Contractor
 Address 4191 S. Jackie St. Pahrump, Nevada 89048 Contractor
 Nevada contractor's license number 0049225 issued by the State Contractor's Board
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2114
 Signed Forrest Lakue
 By driller performing actual drilling on site or contractor
 Date March 5, 2001

