

OFFICE USE ONLY  
 Log No. 86678  
 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. 22804

1. OWNER Bureau of Reclamation ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS PO Box 61420  
Boalder City NV 89006

2. LOCATION SEE 1/4 SE 1/4 Sec. 30 T 21 N/S R 63 E CLARK County  
 PERMIT NO. 160-30-000-003 Issued by Water Resources Parcel No. \_\_\_\_\_ Subdivision Name \_\_\_\_\_

3. WORK PERFORMED  
 New Well  Replacc  Recondition  
 Deepen  Abandon  Other \_\_\_\_\_

4. PROPOSED USE  
 Domestic  Irrigation  Test  
 Municipal/Industrial  Monitor  Stock

5. WELL TYPE  
 Cable  Rotary  RVC  
 Air  Other HSA

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
GRAVEL		0	40	40
CLAY		40	44	4
GRAVEL		44	45	1
CLAY		45	48	3
SILT		48	51	3
CLAY		51	53	2
SILT		53	54	1
CLAY		54	57	3
silty SAND		57	80	3

8. WELL CONSTRUCTION  
 Depth Drilled \_\_\_\_\_ Feet Depth Cased \_\_\_\_\_ Feet

HOLE DIAMETER (BIT SIZE)  
10 1/4 Inches From 0 Feet To 80 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4</u>	<u>SC40</u>		<u>10</u>	<u>60</u>

Perforations:  
 Type perforation MACHINE SLOTTED  
 Size perforation 1.020  
 From 60 feet to 80 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 56 to 58  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout

Gravel Packed:  Yes  No  
 From 58 feet to 86 feet

9. WATER LEVEL  
 Static water level 6.5 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started 5/14 2002, 19\_\_\_\_  
 Date completed 5/14, 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			

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name AGILE Drilling Services LLC. Contractor  
 Address 7150 Alameda RD Contractor  
LAS VEGAS NV 89119  
 Nevada contractor's license number 51266 issued by the State Contractor's Board.  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2193  
 Signed Victor Chen  
 By driller performing actual drilling on site or contractor  
 Date 05-15-02