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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. 21654

1. OWNER Frank & Cindy Rietz ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 1391 E Nevada Way _____
Amargosa Valley, NV 89000 _____
 2. LOCATION SW 1/4 Sec. 22 T. 16 N. R. 49 E. Nye Co. _____
 PERMIT NO. 19-511-02 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 Mud

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
red sand w/ gravel		0	52	52
compacted gravel		52	58	6
tan sand w/ gravel		58	135	77
compacted gravel		135	139	4
sand & gravel	1st	139	152	13
limestone		152	155	3
sand & gravel	2nd	155	176	21
limestone		176	181	5
sandy clay		181	195	14
compacted gravel		195	208	13
sandy clay		208	217	9
limestone		217	220	3

8. WELL CONSTRUCTION
 Depth Drilled 220 Feet Depth Cased 220 Feet
 HOLE DIAMETER (BIT SIZE)
 From 12 1/2 Inches To 0 Feet 220 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6	PVC	Sch. 80	0	220
Surface Protective Casings:				
8	Steel	.1875	0	7

Perforations:
 Type perforation Machined
 Size perforation 3/16" x 3" Every 12"
 From 140 feet to 180 feet
 From 200 feet to 210 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal 50'
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 50 feet to 220 feet

9. WATER LEVEL
 Static water level 130 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 7/11-02
 Date completed 7-14-02

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> 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 Cook Drilling Co Contractor
 Address Box 70 Box 443 Contractor
Amargosa Valley, NV 89000
 Nevada contractor's license number issued by the State Contractor's Board 5376-A
 Nevada driller's license number issued by the Division of Water Resources the on-site driller 2160
 Signed Reef Rietz
 By driller performing actual drilling on site or contractor
 Date _____