

OFFICE USE ONLY  
Log No. **76638**  
Permit No. \_\_\_\_\_  
Basin. **207**

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. **19462**

1. OWNER **DAVE HUBENEN** ADDRESS AT WELL LOCATION **4, Lots NORTH ON COTTONTAIL LANE, SUNNYSID**  
MAILING ADDRESS **4529 BETA DRIVE LAS VEGAS, NV 89121** NEVADA  
2. LOCATION **SW 1/4 SW 1/4 Sec 207 T 7 N 61 E N 1/2 NE** County  
PERMIT NO. **13-631-91** Parcel No. **BEIT HARKS** 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
TOP Soil		0	3	3
Sand-Clay		3	45	42
Brown Clay	X	45	60	15
White Clay	X	60	75	15
Brown Clay		75	108	33

8. WELL CONSTRUCTION  
Depth Drilled **108** Feet Depth Cased **108** Feet  
HOLE DIAMETER (BIT SIZE)  
From To  
**10 5/8** Inches **0** Feet **108** Feet  
Inches Feet Feet  
Inches Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>6 5/8</b>		<b>Sch 40</b>	<b>0</b>	<b>108</b>

Perforations:  
Type perforation **Jaw cut**  
Size perforation **1 1/8" x 6"**  
From **68** feet to **108** feet  
From feet to feet  
From feet to feet  
From feet to 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 **108** feet

9. WATER LEVEL  
Static water level **17** feet below land surface  
Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water temperature **cold** °F Quality **fair**

Date started **7-13-99**, 19\_\_\_\_\_  
Date completed **7-14-99**, 19\_\_\_\_\_

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<b>14</b>	<b>6</b>	<b>4</b>

10. DRILLER'S CERTIFICATION  
This well was drilled under my supervision and the report is true to the best of my knowledge.  
Name **Dave Drilling and Pumps** Contractor  
Address **P.O. Box 54 Hiko NV 89017** Contractor  
Nevada contractor's license number issued by the State Contractor's Board **0028266**  
Nevada driller's license number issued by the Division of Water Resources the on-site driller **1191**  
Signed **Mike Davi**  
By driller performing actual drilling on site or contractor  
Date **8-5-99**