

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. **31245**

1. OWNER **JEFFERY & LENNA SKELTON** ADDRESS AT WELL LOCATION **1610 W BLOSSER RANCH RD.**
 MAILING ADDRESS **1610 W BLOSSER RANCH RD.**
PAHRUMP, NV

2. LOCATION **SE** 1/4 **NW** 1/4 Sec. **32** T **19S** N/S R **53E** E **NYE** County
 PERMIT NO. **41-602-28** **GOLDEN SPRING RANCH UNIT 7**
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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
CLAY		0	69	69
CALICHE	WB	69	74	5
CLAY		74	93	19
CALICHE	WB	93	107	14
CLAY		107	132	25
CALICHE	WB	132	147	15
CLAY		147	176	29
CALICHE	WB	176	185	9
CLAY		185	200	15

WGS 84
 NORTH 36 DEGREES 15.428
 WEST 116 DEGREES 02.637

DCNR/DWR
 RECEIVED
 JAN 02 2008
 LAS VEGAS OFFICE

8. WELL CONSTRUCTION
 Depth Drilled **200** Feet Depth Cased **200** Feet

HOLE DIAMETER (BIT SIZE)

From	To
10 Inches	0 Feet
	200 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6	3.63	.280	0	200

Perforations:
 Type perforation **SAWCUT**
 Size perforation **1/8 X 3**

From	140	feet to	200	feet
From		feet to		feet
From		feet to		feet
From		feet to		feet
From		feet to		feet

Surface Seal: Yes No
 Depth of Seal **50**

Placement Method: Pumped Poured

Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Gravel Packed: Yes No
 From **50** feet to **200** feet

9. WATER LEVEL
 Static water level **65** 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 **GREAT BASIN DRILLING CO. OF NEVADA, INC.**
Contractor

Date started **12/18/2007**, 19
 Date completed **12/19/2007**, 19

7. WELL TEST DATA

TEST METHOD:	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift	G.P.M.	

Address **1220 E MANSE RD**
Contractor

PAHRUMP, NV. 89048

Nevada contractor's license number issued by the State Contractor's Board **47333**

Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1642**

Signed *Thomas Dan*
By driller performing actual drilling on-site or contractor

Date **12/20/2007**