

**STATE OF NEVADA**  
**DIVISION OF WATER RESOURCES**  
**WELL DRILLER'S REPORT**

OFFICE USE ONLY  
 Log No. 104624  
 Permit No. \_\_\_\_\_  
 Basin 147

PRINT OR TYPE ONLY

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 31332

1. OWNER **USAF Tonopah Test Range** **Well-53** ADDRESS AT WELL LOCATION **Gold Flats**  
 MAILING ADDRESS **P.O. Box 569**  
**Indian Springs, NV 89018** Subdivision Name: N/A County: Nye

2. LOCATION **NW¼NW¼ Sec30T4 /S R50E** Latitude **37°34'19.8"N** UTM E \_\_\_\_\_  NAD 27  
 PERMIT/WAIVER NO. \_\_\_\_\_ Longitude **116°26'2.4"W** W \_\_\_\_\_  NAD 83/WGS 84  
 Issued by Water Resources Parcel No. \_\_\_\_\_

3. WORK PERFORMED  
 New Well  Replace  Recondition  
 Deepen  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
Black, Gray, Tan Gravel		0'	420'	420'
Red, Tan Clay w/Gravel		420'	480'	60'
Black, Gray, Tan Sandy Gravel		480'	610'	130'
Silty Tan Clay		610'	670'	60'
Black, Gray, Tan Sandy Gravel		670'	755'	85'
Light Purple Rock		755'	770'	15'
Reddish Black Rock		770'	780'	10'
Red and Black Gravel		780'	800'	20'

9. WELL CONSTRUCTION

Depth Drilled **800** Feet Depth Cased **799.5** Feet

HOLE DIAMETER (BIT SIZE)

From	To
26.0 Inches	0 Feet 50 Feet
17.5 Inches	50 Feet 800 Feet
_____ Inches	_____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
22.0	58.07	.250	0	50
10.75	34.84	.3125	+2	799.5
2.375	3.65	.154	+2	701

**DCNR/DWR**  
**RECEIVED**  
 JAN 07 2008  
**LAS VEGAS OFFICE**

NOTE: 2" pipe plumbed into 10" casing at 701'

Perforations:  
 Type of perforation **Full Flow Louvers**  
 Size of perforation **.050**

From	To
500 feet to	619 feet
679 feet to	799.5 feet
_____ feet to	_____ feet
_____ feet to	_____ feet
_____ feet to	_____ feet

Annular Seal:  Yes  No

Material	Depth	Method
<input checked="" type="checkbox"/> Neat Cement	0' to 470'	<input checked="" type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/> Cement Grout	_____ to _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout	_____ to _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/> ≥30% Bentonite Grout	_____ to _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
Gravel Pack: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	470' to 800'	<input type="checkbox"/> Pumped <input checked="" type="checkbox"/> Poured
Type:	<b>1/4 x 1/8 SRI</b>	
Bentonite Chips: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ to _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
Type:		

Date started: **05-Dec**, 20 **07**  
 Date completed: **14-Dec**, 20 **07**

7. Water Level

Static water level: **464** feet below land surface  
 Artesian Flow: **No** G.P.M. **N/A** P.S.I.  
 Water Temperature: **Cool** °F  
 Quality: **Fair**

8. WELL TEST DATA

TEST METHOD:	TEST METHOD:		
	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift			
@800'	<b>305.0</b>	<b>24.0</b>	<b>1.0</b>
_____			
_____			
_____			

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name **Boart Longyear Drilling Service** (CONTRACTOR)  
 Address **P.O. Box 5279** (CONTRACTOR)  
**Elko, NV 89802**  
 Nevada contractor's license number issued by the State Contractor's Board **0021976**  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2039**

Signed \_\_\_\_\_  
 By driller performing actual drilling on site or contractor  
 Date **18-Dec-07**