

**WELL DRILLER'S REPORT**

PRINT OR TYPE ONLY  
DO NOT WRITE ON BACK

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

NOTICE OF INTENT NO. **32656**

1. OWNER **MICHAEL D'ERRICO** ADDRESS AT WELL LOCATION **4360 E SUSQUEHANNA ST**  
MAILING ADDRESS **4360 E SUSQUEHANNA ST.**  
**PAHRUMP, NV**

2. LOCATION **NE** 1/4 **NW** 1/4 Sec. **17** T **20S** N/S R **54E** E **NYE** County  
PERMIT NO. **45-171-43** Parcel No. \_\_\_\_\_ Subdivision Name \_\_\_\_\_  
Issued by Water Resources \_\_\_\_\_

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	6	6
CALICHE		6	18	12
CLAY		18	34	16
CALICHE		34	50	16
CLAY		50	82	32
CALICHE	WB	82	96	14
CLAY		96	120	24
CALICHE	WB	120	135	15
CLAY		135	150	15
CALICHE	WB	150	165	15
CLAY		165	175	10
CALICHE	WB	175	195	20
CLAY		195	200	5

WGS84  
N 36 DEGREES 07.725  
W 115 DEGREES 56.037

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

HOLE DIAMETER (BIT SIZE)  
From **0** Feet To **200** Feet  
Inches \_\_\_\_\_ Feet \_\_\_\_\_  
Inches \_\_\_\_\_ Feet \_\_\_\_\_

CASING SCHEDULE

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

Perforations:  
Type perforation **SAWCUT**  
Size perforation **1/8 X3**

From **140** feet to **200** feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No  
Depth of Seal **50**  
Placement Method:  Pumped  Poured  
Gravel Packed:  Yes  No  
From **50** feet to **200** feet

Seal Type:  
 Neat Cement  
 Cement Grout  
 Concrete Grout

9. WATER LEVEL  
Static water level **73** 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 \_\_\_\_\_

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 **1426**  
Signed \_\_\_\_\_  
By driller performing actual drilling on-site or contractor  
Date **11/6/2008**

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.	

**DCNR/DWR RECEIVED**  
NOV 20 2008  
**LAS VEGAS OFFICE**