

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

OFFICE USE ONLY
Log No. 114657
Permit No. _____
Basin 212

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. 35890

1. OWNER Laurence Gibson ADDRESS AT WELL LOCATION Corbet & Egan Crest
MAILING ADDRESS 4137 Browdeer Cir 89129 Subdivision Name: _____ County: _____

2. LOCATION NE 1/4 SE 1/4 Sec 25 T 19S N/S R 59E E Latitude N. 36.16.08.5 UTM E NAD 27
PERMIT/WAIVER No. 126-25-701-019 Longitude W 115-19-03.3 NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

3. WORKED PERFORMED New Well Replace Recondition Deepen Other
4. PROPOSED USE Domestic Irrigation Test Monitor Stock Municipal/Industrial
5. WELL TYPE Cable Rotary RVC Air Other

6. LITHOLOGIC LOG				
Material	Water Strata	From	To	Thick-ness
Gravel		0	50	
Boulders & Gravel		50	76	
Gravel		76	480	
Gravel & Water	xxx	480	500	
Cemented Gravel		500	605	
Gravel & Water	xxx	605	620	
Cemented Gravel		620	680	
Gravel & Water	xxx	680	710	

9. WELL CONSTRUCTION				
Depth Drilled	Feet	Depth Cased	Feet	
710		710		
HOLE DIAMETER (BIT SIZE)				
	From	To		
12 1/4	Inches 0	Feet 50		Feet
9 7/8	Inches 50	Feet 710		Feet
CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8 5/8	18.94	.188	+3	50
6 1/2	SRD PVB	40		

Perforations:
Type of perforation Drilled
Size of perforation 3/16
From 590 feet to 610 feet
From 630 feet to 650 feet
From 670 feet to 690 feet
Annular Seal: Yes No
 Neat Cement to _____ Pumped Poured
 Cement Grout 0 to 50 Pumped Poured
 Concrete Grout to _____ Pumped Poured
 ≥30% Bentonite Grout to _____ Pumped Poured
Gravel Pack: Yes No _____ to _____ Pumped Poured
Type: _____
Bentonite Chips: Yes No _____ to _____ Pumped Poured
Type: _____

Date started: 10/6/2011, 20
Date completed: 11/22/2011, 20

7. Water Level
Static water level: 483 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: Co.01 °F
Quality: _____

8. WELL TEST DATA		
TEST METHOD:	G.P.M.	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift	Draw Down (Feet Below Static)	
DCNR/DWR RECEIVED		
NOV 23 2011		

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Vernon H. Dimick Contractor
Address 5740 Tee Pee Ln. Contractor
Las Vegas NV 89149
Nevada contractor's license number issued by the State Contractor's Board 10062
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 552
Signed VH Dimick
By driller performing actual drilling on-site or contractor
Date 11/22/2011