

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

OFFICE USE ONLY  
 Log No. 114932  
 Permit No. \_\_\_\_\_  
 Basin 162

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. **36201**

1. OWNER **JACQUELINE TRUSTEES & MC SPEARS** ADDRESS AT WELL LOCATION **SILVER SAGE DR**  
 MAILING ADDRESS **PO BOX 902** **2320 SILVER SAGE DR**  
**PAHRUMP, NV 89041**

2. LOCATION **SW 1/4 SE 1/4 Sec. 19 T 19 N/S/R 53 E NYE** County  
 PERMIT NO. **29-443-08** **VALLEY VIEW ACRES**  
Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED  
 New Well  Replace  Recondition  Deepen  
 Abandon  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
EXISTING 8" STEEL WELL		0	100	100
SILT & CLAY		100	125	25
CALICHIE	WB	125	145	20
CLAY		145	160	15
CALICHIE	WB	160	165	5
CLAY		165	175	10
GRAVEL	WB	175	190	15
CLAY		190	200	10
N36°16'50.8" W116°03'23.5"				

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

HOLE DIAMETER (BIT SIZE)  
 EXISTING Inches From **0** Feet To **100** Feet  
**7-7/8** Inches From **100** Feet To **200** Feet  
 Inches Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8	16.94	.188	0	100
4.5	2.37	.248	0	200

Perforations:  
 Type perforation **SCREEN**  
 Size perforation **.032**  
 From **140** feet to **200** feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal **EXISTING**  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout

Gravel Packed:  Yes  No  
 From **70** feet to **200** feet

DCNR/DWR  
 RECEIVED  
 FEB 09 2012

LAS VEGAS OFFICE

Date started **1/31/2012**, 19  
 Date completed **1/31/2012**, 19

7. WELL TEST DATA

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

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  
 Address **1220 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 *[Signature]*  
 By driller performing actual drilling on-site or contractor  
 Date **2/1/2012**