

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

OFFICE USE ONLY
Log No. 117432
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. 36263

1. OWNER RONALD HOLDER ADDRESS AT WELL LOCATION 1770 SANTOVITO
MAILING ADDRESS 18242 MCDURMOTT W. STE. J PAHRUMP
IRVINE CA 92614-4779 Subdivision Name: Unit 2 Mesa Oeste Estates County: NYE

2. LOCATION NE ¼ SE ¼ Sec 14 T 21S N/S R 53 E Latitude N36°07'18.6" UTM E NAD 27
PERMIT/WAIVER No. 44-751-08 Longitude W115°58'43.9" N 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
 Municipal/Industrial Monitor Stock

5. WELL TYPE
 Cable Rotary RVC
 Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
EXISTING 8"		0	160	160
CLAY		160	180	20
CALICHIE	WB	180	185	5
CLAY		185	205	20
CALICHIE	WB	205	215	10
CLAY		215	230	15
CALICHIE	WB	230	238	8
CLAY		238	250	12
CALICHIE	WB	250	255	5
CLAY		255	260	5

9. WELL CONSTRUCTION

Depth Drilled 260 Feet Depth Cased 260 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
EXISTING	Inches <u>0</u>	Feet <u>160</u>
<u>7-7/8</u>	Inches <u>160</u>	Feet <u>260</u>

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8-5/8</u>	<u>16.94</u>	<u>.188</u>	<u>0</u>	<u>160</u>
<u>4.5</u>	<u>2.37</u>	<u>.248</u>	<u>0</u>	<u>260</u>

Perforations:

Type of perforation SCREEN

Size of perforation .032

From 200 feet to 260 feet

From _____ feet to _____ feet

Annular Seal: Yes No EXISTING

Neat Cement to _____ Pumped Poured

Cement Grout to _____ Pumped Poured

Concrete Grout to _____ Pumped Poured

≥30% Bentonite Grout to _____ Pumped Poured

Gravel Pack: Yes No 60 to 260 Pumped Poured

Type: _____

Bentonite Chips: Yes No _____ to _____ Pumped Poured

Type: _____

Date started: 4-Jun , 20 13
Date completed: 4-Jun , 20 13

7. Water Level
Static water level: 83 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ °F
Quality: _____

8. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

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
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 2485

Signed [Signature]
By driller performing actual drilling on site or contractor

Date 6/25/2013

USE ADDITIONAL SHEETS IF NECESSARY

36.12133
-115.978861