

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

OFFICE USE ONLY
Log No. 117434
Permit No. 29198
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. 36248

1. OWNER BPVL1, LLC
MAILING ADDRESS 5955 EDMOND ST
LV NV 89118-2856

ADDRESS AT WELL LOCATION 125 W IRENE ST
PAHRUMP

Subdivision Name: _____ County: NYE

2. LOCATION NE 1/4 NE 1/4 Sec 9 T 20S N/S R 53 E Latitude N36°14'03.4" UTM E NAD 27
PERMIT/WAIVER No. 29198 35-111-11 Longitude W111°00'53.5" N NAD 83/WGS 84

Issued by Water Resources 25360 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 WELL HAD 12-3/4 AT SURFACE END. REDUCED TO 8-5/8 AT 290'. WE RAN A CAMERA IN THIS WELL & UPPER 12" CASING WAS IN. WE INSTALLED A 10-3/4 LINER IN WELL TO 290' WITH A CONE REDUCER BUSHING ON BOTTOM TO MATCH UP TO 8-5/8 LINER. WE CEMENTED BOTTOM OF 10" IN PLACE. WE GRAVEL PACK BETWEEN 10 & 12. THEN WE DRILLED THROUGH CEMENT PLUG & CLEANED WELL OUT TO 600'.				
DCNR/DWR/SNBO RECEIVED				
JUN 27 2018				
orig log = 11973				

9. WELL CONSTRUCTION

Depth Drilled _____ Feet Depth Cased _____ Feet

HOLE DIAMETER (BIT SIZE)

From	To	Feet	Feet
EXISTING	0	605	

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
12-3/4	33.38	.250	0	300
8-5/8	16.94	.188	290	605
10-3/4	28.04	.250	0	290

Perforations: EXISTING / TORCH CUT

Type of perforation _____
Size of perforation .032

From 180 feet to 240 feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Annular Seal: Yes No

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 to _____ Pumped Poured
Type: _____
Bentonite Chips: Yes No to _____ Pumped Poured
Type: _____

Date started: 29-May, 2013
Date completed: 29-May, 2013

7. Water Level

Static water level: 78 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ °F
Quality: _____

8. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailor <input type="checkbox"/> Pump <input type="checkbox"/> 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

36.23427
-116.01486