

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

OFFICE USE ONLY
Log No. 121672
Permit No. _____
Basin _____

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

37274

1. OWNER JOSEPH DONLEY
MAILING ADDRESS 31 ZAPATA DR
PAHRUMP NV 89048

2. NAME OF WELL LOCATION 520 E DESSERT TRAIL
PAHRUMP
U4 COUNTRY PLACE II NYE

2. LOCATION SW NE 22 19S 53
PERMIT NO. 29-322-01 N36°17'11.7"
W116°00'19.0"

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 | From | To | Thick-ness |
|---------------------|--------|-----|------------|
| SAND & CLAY | 0 | 10 | 10 |
| SAND-CLAY-GRAVEL | 10 | 70 | 60 |
| CLAY-FRACTURED ROCK | 70 | 100 | 30 |
| SAND & CLAY | 100 | 125 | 25 |
| SAND-CLAY-GRAVEL | 125 | 180 | 55 |
| CALICHIE | WB 180 | 190 | 10 |
| SAND & CLAY | 190 | 205 | 15 |
| CALICHIE | WB 205 | 220 | 15 |
| SAND & CLAY | 220 | 225 | 5 |
| CALICHIE | WB 225 | 235 | 10 |
| GRAVEL | WB 235 | 240 | 5 |

9. SCREEN

| Depth Drilled | Feet | Depth Cased | Feet |
|---------------|------|-------------|------|
| 240 | | 240 | |
| From | To | From | To |
| 9-7/8 | 0 | 240 | 240 |

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|-----------|
| 4.5 | 2.37 | .248 | 0 | 240 |

Type of perforation SCREEN
Size of perforation .032
From 160 feet to 240 feet

Yes No
 Neat Cement to Pumped Poured
 Cement Grout to Pumped Poured
 Concrete Grout 0 to 65 Pumped Poured
 ≥30% Bentonite Grout to Pumped Poured

Gravel Pack: Yes No 240 to 65 Pumped Poured
Type: _____
Bentonite Chips: Yes No _____ to _____ Pumped Poured
Type: _____

7. 12-Jan 20 15
13-Jan 20 15

7. 80 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ °F
Quality: _____

8. WELL TEST DATA

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

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 47333
issued by the _____
Nevada driller's license number issued by the 2513
Division of Water Resources, the _____
Keith Arion
By driller performing actual drilling on site or contractor
1/14/2015

USE ADDITIONAL SHEETS IF NECESSARY

NAJ) 36.2866241
27 -116.0044168

(Rev. 05-06)