

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

OFFICE USE ONLY
Log No. 124099
Permit No. _____
Basin _____

**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. 37318

1. OWNER UNDERHILL LIVING TRUST ADDRESS AT WELL LOCATION 1580 W WILSON RD
MAILING ADDRESS PO BOX 2322 PAHRUMP
PAHRUMP NV 89041-2322 Subdivision Name: UF CAL VEGAS RANCHOS County: NYE

2. LOCATION SE ¼ NW ¼ Sec 17 T 20S N/S R 53 E Latitude N36°12'46.05" UTM E NAD 27
PERMIT/WAIVER No. 36-282-26 Longitude W116°02'34.56" 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 Monitor Stock
 Municipal/Industrial

5. WELL TYPE Cable Rotary RVC
 Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
CLAY		0	75	-75
SANDY CLAY & ROCK LAYER	WB	75	95	-20
CLAY & ROCK LAYERS		95	185	-90
SAND & GRAVEL	WB	185	205	-20
SAND & CLAY		205	240	-35
			150	-150

9. WELL CONSTRUCTION

Depth Drilled 240 Feet Depth Cased 240 Feet

HOLE DIAMETER (BIT SIZE)

From	To	Feet	Feet
<u>12-1/4</u> inches	<u>0</u>	<u>240</u>	<u>240</u>
_____ inches	_____	_____	_____
_____ inches	_____	_____	_____

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6</u>	<u>10.78</u>	<u>.250</u>	<u>+2</u>	<u>5</u>
<u>6</u>	<u>3.63</u>	<u>.280</u>	<u>5</u>	<u>240</u>

Perforations:

Type of perforation FACTORY SCREEN
Size of perforation .032

From 185 feet to 240 feet
From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement to _____ Pumped Poured
 Cement Grout to _____ Pumped Poured
 Concrete Grout 0 to 55 Pumped Poured
 ≥30% Bentonite Grout to _____ Pumped Poured

Gravel Pack: Yes No 55 to 240 Pumped Poured
Type: _____
Bentonite Chips: Yes No to _____ Pumped Poured
Type: _____

Date started: 1-Oct , 20 15
Date completed: 2-Oct , 20 15

7. Water Level
Static water level: 75 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ °F
Quality: _____

8. WELL TEST DATA

TEST METHOD: Bailer 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 2160

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

Date 10/7/2015

USE ADDITIONAL SHEETS IF NECESSARY

36.2128313 NAD
- 116.0420724 27

(Rev. 05-06)