



WELL DRILLER'S REPORT

Please complete this form in its entirety

NOTICE OF INTENT NO. **2533**

PRINT OR TYPE ONLY

1. OWNER BUD COBBIN ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS _____
 2. LOCATION SW 1/4 SE 13 Sec. 13 T. 20 S N/S R. 52 E County NYE
 PERMIT NO. LOT 92 Parcel No. _____ Subdivision Name CHARLESTON PARK RANCHES UNIT 6

3. TYPE OF WORK
 New Well Recondition
 Deepen Other
 4. PROPOSED USE
 Domestic Irrigation Test
 Municipal Industrial Stock
 5. TYPE WELL
 Cable Rotary
 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
CLAY		0	54	54
CALICHE	WB	54	57	3
CLAY		57	84	27
CALICHE	WB	84	89	5
CLAY		89	98	9
CALICHE	WB	98	108	10
CLAY		108	123	15
CALICHE	WB	123	134	11
CLAY		134	140	6

8. WELL CONSTRUCTION
 Diameter 12 1/2 inches Total depth 140 feet
 _____ inches
 _____ inches
 Casing record 140' 8 5/8 O.D.
 Weight per foot 16.94 Thickness 188
 Diameter From To
8 5/8 inches 0 feet 140 feet
 _____ inches _____ feet _____ feet
 Surface seal: Yes No Type CONCRETE
 Depth of seal 50' feet
 Gravel packed: Yes No
 Gravel packed from 50' feet to 140 feet
 Perforations:
 Type perforation FACTORY SAWCUT
 Size perforation 1/2 INCH BY 3 INCH
 From 120 feet to 140 feet
 From _____ feet to _____ feet

RECEIVED

MAR 6 1989

Div. of Water Resources
 Branch Office - Las Vegas, NV

Date started 1-17 1989
 Date completed 1-25 1989

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump

9. WATER LEVEL
 Static water level 4.7 feet below land surface
 Flow _____ G.P.M. _____ P.S.I.
 Water temperature Coal °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 S.H. Drilling Contractor
 Address HCR 65 Box 70906 Pahrump Contractor
 Nevada contractor's license number issued by the State Contractor's Board 22059
 Nevada contractor's driller's number issued by the Division of Water Resources 1426
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1523
 Signed Dennis Brown
 By driller performing actual drilling on site or contractor
 Date 2-5-89

BAILER TEST
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours