

OFFICE USE ONLY
 Log No. 35516
 Permit No. 1
 Basin 1
 NOTICE OF INTENT NO. 8068

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

1. OWNER Le Roy McAfee ADDRESS AT WELL LOCATION Paula
 MAILING ADDRESS _____
 2. LOCATION NE 1/4 NW 1/4 Sec 14 T 21 S N/S R 53 E County Nye
 PERMIT NO. N/A Parcel No. 44-711-06 Mesa Oeste Est. Lot 6 BIK8 UW3
Issued by Water Resources Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon 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	Thickness
Clay		0'	18'	18'
Caliche		18'	21'	3'
Clay		21'	27'	6'
Caliche		27'	33'	6'
Clay		33'	64'	31'
limestone	WB	64'	72'	8'
Clay		72'	86'	14'
Caliche	WB	86'	92'	6'
Clay		92'	99'	7'
Caliche	WB	99'	105'	6'
Clay		105'	115'	10'
Caliche	WB	115'	118'	3'

8. WELL CONSTRUCTION
 Depth Drilled 140' Feet Depth Cased 140' Feet
 HOLE DIAMETER (BIT SIZE)
 From 0' Feet To 140' Feet
12 1/4 Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8.518	16.94	.988	0'	140'

Perforations:
 Type perforation factory sawcut
 Size perforation 1/8" x 3/8"
 From 120 feet to 140 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 50' Neat Cement
 Cement Grout
 Placement Method: Pumped Poured Concrete Grout
 Gravel Packed: Yes No
 From 140' feet to 50' feet

9. WATER LEVEL
 Static water level 53 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

RECEIVED

NOV 13 1991

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

Date started 11-5, 1991
 Date completed 11-8, 1991

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <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 HCR 78 Box 80358 Contractor
Pahrump, NV 89041
 Nevada contractor's license number issued by the State Contractor's Board 30880
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1642
 Signed Thomas Dan
 By driller performing actual drilling on site or contractor
 Date 11-11-91