

OFFICE USE ONLY

Log No. 40516  
 Permit No. \_\_\_\_\_  
 Basin I

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

NOTICE OF INTENT NO. 10341

1. OWNER Robert Irwin ADDRESS AT WELL LOCATION Lot 15  
 MAILING ADDRESS Keenan Wmy

2. LOCATION SW 1/4 SE 1/4 Sec 14 T 21S N/S R 53 E Nye County  
 PERMIT NO. 44-742-10 Parcel No. Mesa Oeste Subdivision Name Estates

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	16	16
caliche		16	22	6
clay		22	30	8
caliche		30	34	4
clay		34	44	10
caliche		44	49	5
clay		49	58	9
caliche	wB	58	60	2
clay		60	70	10
caliche	wB	70	73	3
clay		73	91	18
caliche	wB	91	96	5
clay		96	112	16
caliche	wB	112	118	6
clay		118	128	10
caliche	wB	128	135	7
clay		135	140	5

8. WELL CONSTRUCTION  
 Depth Drilled 140 Feet Depth Cased 140 Feet

HOLE DIAMETER (BIT SIZE)  
 From 12 1/4 Inches To 0 Feet 140 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8 3/8</u>	<u>16.94</u>	<u>.188</u>	<u>0</u>	<u>140</u>

Perforations:  
 Type perforation Factory Saw cut  
 Size perforation 1 1/2 x 3"  
 From 120 feet to 140 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Neat Cement  
 Cement Grout  
 Concrete Grout

Depth of Seal 50

Placement Method:  Pumped  Poured

Gravel Packed:  Yes  No  
 From 50 feet to 140 feet

9. WATER LEVEL  
 Static water level 55 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started 11-12 1992  
 Date completed 11-17 1992

7. 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 Her 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 11-23-92

RECEIVED  
 DEC 02 1992  
 Div. of Water Resources  
 Branch Office - Las Vegas, NV

