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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. 10900

1. OWNER John Johnston ADDRESS AT WELL LOCATION Leslie St
 MAILING ADDRESS _____
 2. LOCATION S10 1/4 NW 1/4 Sec 20 T. 19 N/S R. 53 E Nye County
 PERMIT NO. 24-387-01 Issued by Water Resources Parcel No. Crystalare Estates 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	6	6
caliche		6	8	2
Clay		8	20	12
caliche		20	23	3
Clay		23	31	8
caliche		31	33	2
Clay		33	53	20
caliche	WB	53	56	3
Clay		56	68	12
caliche	WB	68	71	3
Clay		71	81	10
caliche	WB	81	83	2
Clay		83	94	11
caliche	WB	94	96	2
Clay		96	108	12
caliche	WB	108	113	5
Clay		113	127	14
caliche	WB	127	131	4
Clay		131	135	4
caliche	WB	135	140	5

8. WELL CONSTRUCTION
 Depth Drilled 140 Feet Depth Cased 140 Feet
 HOLE DIAMETER (BIT SIZE)
 From 12 1/4 Inches To 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 5/8</u>	<u>16.94</u>	<u>.188</u>	<u>0</u>	<u>140</u>

 Perforations:
 Type perforation Factory Saw cut
 Size perforation 1/2 x 3
 From 100 feet to 120 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 50 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 50 feet to 140 feet

RECEIVED

JUL 13 1993

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

Date started 6-21 1993
 Date completed 6-25 1993

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			

9. WATER LEVEL
 Static water level 49 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °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 Great Basin Drilling Inc. Contractor
 Address Herz Box 80358 Contractor
Phoenix 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 7-6-93