

Log No. 42227  
 Permit No. 1162  
 Basin 1162

in Book

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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. 12016

1. OWNER Terry Capron ADDRESS AT WELL LOCATION Medicine Man  
 MAILING ADDRESS \_\_\_\_\_  
 2. LOCATION NE 1/4 SE 1/4 Sec. 14 T. 20S N/S R. 52 E Nye County  
 PERMIT NO. 28-733-01 Parcel No. \_\_\_\_\_ Subdivision Name Charleston Park

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	4	4
Caliche		4	7	3
Clay		7	23	16
Caliche		23	26	3
Clay		26	49	23
Caliche		49	54	5
Clay		54	75	21
Caliche	WB	75	78	3
Clay		78	84	6
Caliche	WB	84	87	3
Clay		87	108	21
Caliche	WB	108	110	2
Clay		110	123	13
Caliche	WB	123	126	3
Clay		126	137	11
Caliche	WB	137	140	3

8. WELL CONSTRUCTION  
 Depth Drilled 148 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)
85/8	16.94	1/8	0	140

Perforations:  
 Type perforation Factory Saw cut  
 Size perforation 1/8 x 3/8  
 From 100 feet to 120 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 46 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started 7-20 1993  
 Date completed 7-23 1993

7. WELL TEST DATA

TEST METHOD:	Bailer	Pump	Air Lift
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
<b>RECEIVED</b>			
AUG 24 1993			
Div. of Water Resources			
Branch Office - Las Vegas, NV			

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 NR 74 Box 40359 Contractor  
Shampoo 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  
 By driller performing actual drilling on site or contractor  
 Date 8-13-93