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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. 12021

1. OWNER BUD CORBIN ADDRESS AT WELL LOCATION LDT 65 SHADY LN  
 MAILING ADDRESS PAHRUMP NV  
 2. LOCATION SE 1/4 NE 1/4 Sec. 8 T. 20S N/S R. 53 E. NYE County \_\_\_\_\_  
 PERMIT NO. 35-153-01 CAL VEGAS Parcel No. \_\_\_\_\_ 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	Thick-ness
CLAY				7
CALICHE		7	9	2
CLAY		9	14	5
CALICHE		14	17	3
CLAY		17	32	15
CALICHE		32	34	2
CLAY		34	44	10
CALICHE		44	48	4
CLAY		48	56	8
CALICHE		56	59	3
CLAY		59	72	13
CALICHE		72	75	3
CLAY		75	85	10
CALICHE		85	87	2
CLAY		87	101	14
CALICHE		101	103	2
CLAY		103	115	12
CALICHE		115	117	2
CLAY		117	121	4
CALICHE		121	123	2
CLAY		123	128	5
CALICHE		128	131	3
CLAY		131	137	6
CALICHE		137	139	2
CLAY		139	140	1
		140		140

8. WELL CONSTRUCTION  
 Depth Drilled 140 Feet Depth Cased 140 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From \_\_\_\_\_ To \_\_\_\_\_  
12.25 Inches 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	16.9	.188	0	140

Perforations:  
 Type perforation FACTORY SAW CUT  
 Size perforation 1\8 X 3"  
 From 100 feet to 120 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 50 \_\_\_\_\_  Neat Cement  
 Cement Grout  
 Placement Method:  Pumped  Concrete Grout  
 Poured  
 Gravel Packed:  Yes  No  
 From 50 feet to 140 feet

9. WATER LEVEL  
 Static water level 48 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started 7-26-93, 19\_\_\_\_\_  
 Date completed 7-30-93, 19\_\_\_\_\_

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.  
**GREAT BASIN DRILLING CO INC**  
 Name \_\_\_\_\_ Contractor  
 Address HCR 78 BOX 80358  
PAHRUMP NV 89041  
 Nevada contractor's license number 30880  
 issued by the State Contractor's Board.  
 Nevada driller's license number issued by the 1642  
 Division of Water Resources, the on-site driller.  
 Signed Thomas Dun  
 By driller performing actual drilling on site or contractor  
 Date 8-16-93



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AUG 24 1993