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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. **13288**

1. OWNER **AL BASKOFF** ADDRESS AT WELL LOCATION
 MAILING ADDRESS **LOT 60 MEDICINE MAN PAHRUMP NV**

2. LOCATION **NE 1/4 SW 1/4 Sec. 18 T. 20S. N/S R. 53 E. NYE** County
 PERMIT NO. **36-202-25** Parcel No. **CHARLESTON PARK** 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	3	3
CALICHIE		3	5	2
CLAY		5	22	17
CALICHIE		22	24	2
CLAY		24	39	15
CALICHIE		39	42	3
CLAY		42	51	9
CALICHIE	WR	51	55	4
CLAY		55	73	18
CALICHIE	WR	73	76	3
CLAY		76	87	11
CALICHIE	WR	87	89	2
CLAY		89	110	21
CALICHIE	WR	110	114	4
CLAY		114	123	9
CALICHIE	WR	123	125	2
CLAY		125	135	10
CALICHIE	WR	135	137	2
CLAY		137	140	3
		140		140

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

HOLE DIAMETER (BIT SIZE)
 From **12.25** Inches **0** Feet **140** Feet
 To _____ 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 **1-1/8 x 3/4**
 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
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

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 **6-3-54** 19_____
 Date completed **6-5-54** 19_____

7. WELL TEST DATA

TEST METHOD: Bailer Pump 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 CO., INC.** Contractor
 Address **HER 76 BOX 80358 PAHRUMP NV 89041** Contractor

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 **1542**

Signed *Thomas Dan*
 By driller performing actual drilling on site or contractor
 Date **6/11/54**

RECEIVED
 JUN 30 1954
 Div. of Water Resources
 Branch Office - Las Vegas, NV