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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. **14573**

1. OWNER **Bill Moore** ADDRESS AT WELL LOCATION **Lot 115 Simkins Ave**  
 MAILING ADDRESS \_\_\_\_\_  
 2. LOCATION **NE 1/4 NE 1/4 Sec. 30 T. 19S N/S R. 53 E N1/2** County \_\_\_\_\_  
 PERMIT NO. **29-472-06** Parcel No. **Valley View Acres** Subdivision Name \_\_\_\_\_  
 Issued by Water Resources \_\_\_\_\_

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		0	4	4
Caliche		4	7	3
Clay		7	18	11
Caliche		18	24	6
Clay		24	29	5
Caliche		29	31	2
Clay		31	38	7
Caliche		38	41	3
Clay		41	51	10
Caliche	WB	51	54	3
Clay		54	60	6
Caliche	WB	60	63	3
Clay		63	72	9
Caliche	WB	72	75	3
Clay		75	81	6
Caliche	WB	81	84	3
Clay		84	93	9
Caliche	WB	93	96	3
Clay		96	100	4

8. WELL CONSTRUCTION  
 Depth Drilled **100** Feet Depth Cased **100** Feet  
 HOLE DIAMETER (BIT SIZE)  
 From **12 1/4** Inches To **10.0** Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6	12.92	.188	0	100

Perforations:  
 Type perforation **Factory Saw Cut**  
 Size perforation **1/8" x 3"**  
 From **80** feet to **100** 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 **100** feet

9. WATER LEVEL  
 Static water level **51** feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started **Feb 20**, 19 **95**  
 Date completed **Feb 23**, 19 **95**

7. WELL TEST DATA  
 TEST METHOD:  Bailer  Pump  Air Lift  

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<b>RECEIVED</b>		
<b>MAR 21 1995</b>		
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 **HCR 78 Box 80358** Contractor  
**Pahrump, NV. 89041**  
 Nevada contractor's license number **30880** issued by the State Contractor's Board.  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1642**  
 Signed **Thomas De...**  
 By driller performing actual drilling on site or contractor  
 Date **3/16/95**