

OFFICE USE ONLY
 Log No. 47452
 Permit No. _____
 Basin _____
 NOTICE OF INTENT NO. 14578

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

1. OWNER Schevermann ADDRESS AT WELL LOCATION Lot 26 Stirrup Ave
 MAILING ADDRESS _____
 2. LOCATION SE 1/4 NW 1/4 Sec. 34 T. 20 S. R. 53 E. Nye County _____
 PERMIT NO. 40-663-02 Parcel No. _____ Subdivision Name Calvada Valley

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
Caliche		3	7	4
Clay		7	12	5
Caliche		12	16	4
Clay		16	26	10
Caliche		26	28	2
Clay		28	44	16
Caliche		44	46	2
Clay		46	50	4
Caliche		50	52	2
Clay		52	69	17
Caliche	WB	69	72	3
Clay		72	79	7
Caliche	WB	79	81	2
Clay		81	94	13
Caliche	WB	94	99	5
Clay		99	113	14
Caliche	WB	113	116	3
Clay		116	125	9
Caliche	WB	125	130	5
Clay		130	140	10

8. WELL CONSTRUCTION
 Depth Drilled 140 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)
<u>8 7/8</u>	<u>16.94</u>	<u>16.94</u>	<u>0</u>	<u>140</u>

Perforations:
 Type perforation Factory Saw cut
 Size perforation 18 x 3/16
 From 100 feet to 120 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Depth of Seal _____
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 50 feet to 140 feet

9. WATER LEVEL
 Static water level 52 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 3/6 1995
 Date completed 3/10 1995

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.
 Name Great Basin Drilling
 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 Division of Water Resources, the on-site driller 1642
 Signed Thomas Dun
 By driller performing actual drilling on site or contractor
 Date 3/21/95