

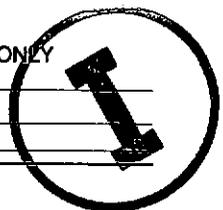
STATE OF NEVADA
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY

Log No. 58959

Permit No.

Basin 162



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

NOTICE OF INTENT NO. 15113

1. OWNER BLOCK, BILL ADDRESS AT WELL LOCATION 3841 S BLAGG
 MAILING ADDRESS 3841 S BLAGG
PAHRUMP, NV 89041

2. LOCATION SW 1/4 SW 1/4 Sec. 34 T 20S N/S R 53E E NYE County
 PERMIT NO. 40-701-23 CALVADA
 Issued by Water Resources 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 & CALICHIE		0	68	68
CALICHIE	WB	68	82	14
CLAY		82	104	22
CALICHIE	WB	104	116	12
CLAY		116	128	12
CALICHIE	WB	128	134	6
CLAY		134	140	6

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)
8.625	16.94	.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

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 62 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

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. Contractor
 Address PO Box 4220 Contractor
PAHRUMP 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 Dun
 By driller performing actual drilling on-site or contractor
 Date 12/11/96

Date started 9/17/96 19____
 Date completed 9/20/96 19____

7. WELL TEST DATA

TEST METHOD:	Draw Down (Feet Below Static)		Time (Hours)
	G.P.M.		
<input type="checkbox"/> Bailer			
<input type="checkbox"/> Pump			
<input type="checkbox"/> Air Lift			