

STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 66586
 Permit No. _____
 Basin 16a

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

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

NOTICE OF INTENT NO. 16127

1. OWNER LARA, SYLVIA ADDRESS AT WELL LOCATION 3360 PITMAN
 MAILING ADDRESS 3360 PITMAN PAHRUMP, NV 89048

2. LOCATION NW 1/4 SW 1/4 Sec. 1 T 20S N/S R 52E E NYE County
 PERMIT NO. 28-422-33 VEGAS ACRES
 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	60	60
CALICHIE	WB	60	73	13
CLAY		73	89	16
CALICHIE	WB	89	101	12
CLAY		101	112	11
CALICHIE	WB	112	121	9
CLAY		121	135	14
CALICHIE	WB	135	140	5

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 178 X 3

From <u>100</u>	feet to <u>120</u>	feet
From _____	feet to _____	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 48 feet below land surfac
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 6/2/97, 19____
 Date completed 6/6/97, 19____

7. WELL TEST DATA

TEST METHOD:	G.P.M.		Time (Hours)
	_____	_____	
<input type="checkbox"/> Bailer	Draw Down (Feet Below Static)		_____
<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 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 D...
 By driller performing actual drilling on-site or contractor
 Date 6/20/97

