

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

OFFICE USE ONLY
 Log No. **67586**
 Permit No. **230**
 Basin **230**

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. **16146**

1. OWNER **JACOBS, WILLIAM** ADDRESS AT WELL LOCATION **FARM ROAD AMARGOSA**
 MAILING ADDRESS **FARM ROAD AMARGOSA, NV**

2. LOCATION **SE 1/4 SW 1/4 Sec. 9 T 16S N/S R 49E E NYE** County **NYE**
 PERMIT NO. **19-151-14** 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
COBBLES & SAND		0	4	4
SAND & GRAVEL		4	40	36
CEMENTED GRAVEL & SAND		40	185	145
CEMENTED GRAVEL & SAND	WB	185	300	115

8. WELL CONSTRUCTION
 Depth Drilled **300** Feet Depth Cased **300** Feet

HOLE DIAMETER (BIT SIZE)
 From To
12.25 Inches **0** Feet **300** 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	300

Perforations:
 Type perforation **FACTORY SAW CUT**
 Size perforation **178 X 3**

From **260** feet to **300** 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 **300** feet

9. WATER LEVEL
 Static water level **165** feet below land surfac
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started **7/10/97** . 19
 Date completed **7/12/97** . 19

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 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 Dean*
 By driller performing actual drilling on-site or contractor
 Date **7/22/97**

