



PRINT OR TYPE ONLY
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WELL DRILLER'S REPORT *in book*

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

NOTICE OF INTENT NO. 16361

1. OWNER **SCHOENECKER, ALLEN** ADDRESS AT WELL LOCATION **3201 E. BOND**
 MAILING ADDRESS **3201 E. BOND PAHRUMP, NV 89048**

2. LOCATION **NW 1/4 SW 1/4 Sec 31 T 21S** N/S **R 54E** E **NYE** County
 PERMIT NO. **45-431-07** CAL VISTA Subdivision Name

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	Thickness
CLAY		0	110	110
CALICHE	WB	110	115	5
CLAY		115	125	10
CALICHE	WB	125	140	15
CLAY		140	150	10
CALICHE	WB	150	162	12
CLAY		162	168	6
CALICHE	WB	168	175	7

8. WELL CONSTRUCTION
 Depth Drilled **175** Feet Depth Cased **175** Feet

HOLE DIAMETER (BIT SIZE)
 From To
12.25 Inches **0** Feet **175** 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	175

Perforations:
 Type perforation **FACTORY SAW CUT**
 Size perforation **1/8" X 3"**

From **135** feet to **155** 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 **175** feet

9. WATER LEVEL
 Static water level **85** 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 Dem*
 By driller performing actual drilling on-site or contractor
 Date **9/1/97**

Date started **8/25/97** .19
 Date completed **8/29/97** .19

7. WELL TEST DATA

TEST METHOD:	G.P.M.		Time (Hours)
	Bailer	Pump	