

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

OFFICE USE ONLY  
 Log No. **71008**  
 Permit No. \_\_\_\_\_  
 Basin **162**

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. **17534**

1. OWNER **KEN SPENCER** ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS **3271 N MAPLE** **3271 N MAPLE**  
**PAHRUMP, NV 89048**  
 2. LOCATION **NE 1/4 SE 1/4 Sec. 24 T 20S** N/S **R 52E E NYE** County \_\_\_\_\_  
 PERMIT NO. **28-793-07** **CHARLESTON PARK RANCHOS**  
 Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED 4. PROPOSED USE 5. WELL TYPE  
 New Well  Replace  Recondition  Domestic  Irrigation  Test  Cable  Rotary  RV  
 Deepen  Abandon  Other  Municipal/Industrial  Monitor  Stock  Air  Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
CLAY & CALICHE		0	62	62
CALICHE	WB	62	74	12
CLAY		74	85	11
CALICHE	WB	85	94	9
CLAY		94	108	14
CALICHE	WB	108	119	11
CLAY		119	133	14
CALICHE	WB	133	140	7

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)
<b>8.625</b>	<b>16.94</b>	<b>.188</b>	<b>0</b>	<b>140</b>

Perforations:  
 Type perforation **FACTORY SAW CUT**  
 Size perforation **1/8" X 3"**  
 From **100** feet to **120** f  
 From \_\_\_\_\_ feet to \_\_\_\_\_ f

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** f

9. WATER LEVEL  
 Static water level **57** feet below land surf  
 Artesian flow \_\_\_\_\_ G.P.M. P  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started **2/23/98**, 19\_\_\_\_  
 Date completed **2/27/98**, 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 D...*  
 By driller performing actual drilling on-site or contractor  
 Date **3/3/98**

