

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

OFFICE USE ONLY
 Log No. **71599**
 Permit No. Basin **1162**

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. **17640**

1. OWNER **BENZENBOWER** ADDRESS AT WELL LOCATION
 MAILING ADDRESS **5381 N. JOHNNIE MINE ROAD** **5381 N. JOHNNIE MINE ROAD**
PAHRUMP, NV 89048

2. LOCATION **NW** 1/4 **SE** 1/4 Sec. **16** T **19S** N/S R **53E** E **NYE** County
 PERMIT NO. **29-261-04** **COUNTRY PLACE II**
 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
SAND & CLAY		0	105	105
CALICHE	WB	105	121	16
CLAY		121	139	18
CALICHE	WB	139	153	14
CLAY		153	172	19
CALICHE	WB	172	185	13
CLAY		185	201	16
CALICHE		201	212	11
CLAY		212	220	8

8. WELL CONSTRUCTION

Depth Drilled **220** Feet Depth Cased **220** Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
10.25	0	220		

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6.625	4.33	.316	0	220

Perforations:

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

From **180** feet to **220** 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 **220** f

9. WATER LEVEL

Static water level **80** feet below land surf
 Artesian flow _____ G.P.M. P
 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

Date started **5/11/98**, 19____
 Date completed **5/15/98**, 19____

7. WELL TEST DATA

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

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 Dan*
 By driller performing actual drilling on-site or contractor

Date **5/22/98**

