WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

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

OFFICE USE ONLY
Log No. 71774
Permit No. 23109
Basin 162

NOTICE OF INTENT NO. 15001.

1. OWNER Ronald Floyd.
MAILING ADDRESS
ADDRESS AT WELL LOCATION Hwy 160.

2. LOCATION NW ¼ NW ¼ Sec. 24 T. 20S N/S R. 53 E. Nye County
PERMIT NO. 23109 (Issued by Water Resources) 35-571-17 (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
Rip Casing with Mills Knife.				
Installed 2 7/8 Drill Pipe. Pumped Baroid Quick Grout with 20% Solids, pumped in 518 cu ft Grout, top of Grout @ ft. 65 ft. Poor 48 cu ft Neat Cement in well, top of Neat @ 20 ft. Poor Concrete Grout to 5 ft. below Ground level				

Date started 6-3, 1998
Date completed 6-11, 1998

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

8. WELL CONSTRUCTION
Depth Drilled ____ Feet Depth Cased ____ Feet

HOLE DIAMETER (BIT SIZE)

	From	To
Inches	Feet	Feet
Inches	Feet	Feet
Inches	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)

Perforations:
Type perforation Mills Knife
Size perforation ½" X 6-8 Inch.
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: ☐ Yes ☐ No
Depth of Seal 260 ft.
Placement Method: ☒ Pumped ☐ Poured
Seal Type: ☐ Neat Cement ☐ Cement Grout ☐ Concrete Grout

Gravel Packed: ☐ Yes ☐ No
From ____ feet to ____ feet

9. WATER LEVEL
Static water level 75 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 (Contractor)
Address P.O. 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 1426
Signed ____ (By driller performing actual drilling on site or contractor)
Date 6-19-98.

(Rev. 3-91)

USE ADDITIONAL SHEETS IF NECESSARY

(O)-627