

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

OFFICE USE ONLY  
 Log No. **72871**  
 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. **18336**

1. OWNER **MICHAEL DELANO** ADDRESS AT WELL LOCATION **3261 E. MCGRAW**  
 MAILING ADDRESS **3261 E. MCGRAW**  
**PAHRUMP, NV 89048**

2. LOCATION **SE** 1/4 **NW** 1/4 Sec. **19** T **21S** N/S R **54** E **NYE** County  
 PERMIT NO. **45-264-08** **GREEN SADDLE RANCH** Subdivision Name  
 issued by Water Resources Parcel No.

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	69	
CALICHE	WB	69	80	11
CLAY		80	97	17
CALICHE	WB	97	113	16
CLAY		113	124	11
CALICHE	WB	124	137	13
CLAY		137	140	3

8. WELL CONSTRUCTION  
 Depth Drilled **140** Feet Depth Cased **140** Feet

HOLE DIAMETER (BIT SIZE)  
 From **10.25** Inches To **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>6.625</b>	<b>3.92</b>	<b>.280</b>	<b>0</b>	<b>140</b>

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

From **100** feet to **140** 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 **140** feet

9. WATER LEVEL  
 Static water level **55** feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started **10/5/98**, 19\_\_\_\_  
 Date completed **10/9/98**, 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. OF NEVADA, INC.** Contractor  
 Address **P.O. BOX 4220** Contractor  
**PAHRUMP, NV. 89048**  
 Nevada contractor's license number issued by the State Contractor's Board **030880**  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1642**  
 Signed *Thomas*  
 By driller performing actual drilling on-site or contractor  
 Date **12/7/98**