

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

OFFICE USE ONLY  
 Log No. **72884**  
 Permit No. \_\_\_\_\_  
 Basin **162**  
 NOTICE OF INTENT NO. **18333**

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

1. OWNER **LEN & DIANNE FERN** ADDRESS AT WELL LOCATION **1511 KEITH ST**  
 MAILING ADDRESS **1511 KEITH ST. PAHRUMP, NV 89048**

2. LOCATION **NE 1/4 SW 1/4 Sec. 35 T 21S N/S R 53E E NYE** County **CALVADA VALLEY**  
 PERMIT NO. **41-342-14** 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  RV  Air  Other \_\_\_\_\_

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
CLAY		0	24	24
CALICHE		24	30	6
CLAY		30	34	4
CALICHE		34	36	2
CLAY		36	64	28
CALICHE	WB	64	72	8
CLAY		72	96	24
CALICHE	WB	96	110	14
CLAY		110	115	5
CALICHE	WB	115	120	5
CLAY		120	132	12
CALICHE	WB	132	140	8

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

HOLE DIAMETER (BIT SIZE)  
 From 0 To 140  
**10.25** 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)
6.625	3.92	.280	0	140

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

From **100** feet to **140** feet f  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet 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** feet f

9. WATER LEVEL  
 Static water level **58** feet below land surf  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started **9/28/98**, 19\_\_\_\_  
 Date completed **10/2/98**, 19\_\_\_\_

7. WELL TEST DATA

TEST METHOD:	G.P.M.		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 Dun*  
 By driller performing actual drilling on-site or contractor  
 Date **10/2/98**

