

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

OFFICE USE ONLY
 Log No. **72945**
 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. **18095**

1. OWNER **Michael and Nicole Hanks** ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS **5821 Doubletree** **5821 Doubletree**
Pahrump, NV 89048

2. LOCATION **SE 1/4 SE 1/4 Sec. 16 T 21S N/S R 54E E Nye** County
 PERMIT NO. **43-101-04** **Cottonwoods at Hafen Ranch**
 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 RVC
 Air Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
brown sandy loam and gravel		0	15	15
brown sandy loam and gravel		15	40	25
brown sandy loam and gravel		40	51	11
brown sandy loam and gravel		51	76	25
brown sandy loam and gravel	x	76	82	6
brown loam and rock	x	82	91	9
brown sandy loam and gravel	x	91	106	15
brown sandy loam and calche	x	106	112	6
brown sandy loam and rock	x	112	116	4
brown calache and rock	x	116	121	5
brown calache and rock	x	121	140	19

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

HOLE DIAMETER (BIT SIZE)
 From To
11 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)
6 5/8	3.7	.280	0	140

Perforations:
 Type perforation **sawcut**
 Size perforation **.188**

From **110** feet to **140** feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Placement Method: Pumped Poured

Gravel Packed: Yes No
 From **50** feet to **140** feet

9. WATER LEVEL
 Static water level **76** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **cold** °F Quality **good**

Date started **11/10/98**, 19____
 Date completed **11/10/98**, 19____

7. WELL TEST DATA

TEST METHOD:	G.P.M.		Time (Hours)
	Bailer	Pump	
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	Draw Down (Feet Below Static)		
	.5	na	.50

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Name **Strickland Construction Co., Inc.** Contractor
 Address **2301 Winery Road, Suite 2** Contractor
Pahrump, NV 89048

Nevada contractor's license number issued by the State Contractor's Board **40277**

Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2086**

Signed _____
 By driller performing actual drilling on-site or contractor

Date **11/18-98**

