

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

OFFICE USE ONLY  
 Log No. 72960  
 Permit No. 162  
 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. 18329

1. OWNER **ULTRASCAPE** ADDRESS AT WELL LOCATION **1320 E. SANTOVITO**  
 MAILING ADDRESS **1320 E. SANTOVITO**  
**PAHRUMP, NV 89048**

2. LOCATION **NW 1/4 SE 1/4 Sec. 14 T 21S** N/S R **53E E NYE** County  
 PERMIT NO. **44-741-08** **MESA OESTE ESTATES** 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	Thick-ness
CLAY		0	35	35
CALICHE		35	44	9
CLAY		44	64	20
CALICHE		64	72	8
CLAY		72	80	8
CALICHE	WB	80	87	7
CLAY		87	105	18
CALICHE	WB	105	112	7
CLAY		112	127	15
CALICHE	WB	127	133	6
CLAY		133	140	7

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

HOLE DIAMETER (BIT SIZE)  
 From 0 To 140  
10.25 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)
6.625	2.94	.280	0	140

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 67 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 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.	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 Dan  
 By driller performing actual drilling on-site or contractor  
 Date **11/23/98**