

OFFICE USE ONLY  
 Log No. **73018**  
 Permit No. \_\_\_\_\_  
 Basin **162**

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

**WELL DRILLER'S REPORT**  
 Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

1. OWNER SERPS FAMILY LIMITED PARTNERSHIP ADDRESS AT WELL LOCATION 4030 E. ASHLEY AVE.  
 MAILING ADDRESS \_\_\_\_\_  
 2. LOCATION NW 1/4 NE 1/4 Sec. 29 T. 21-S. N/S R. 54 E. NYE County \_\_\_\_\_  
 PERMIT NO. 45-321-18 GREEN SADDLE 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	Thickness
Surface		0	4	4
Brown Clay		4	10	6
Brown Clay/Caliche		10	38	28
Brown Clay		38	59	21
Brown Clay/Caliche	X	59	88	29
Brown Clay		88	110	22
Brown Clay/Caliche		110	130	20
Brown Clay		130	142	12
Brown Clay/Gravel	X	142	160	18

8. WELL CONSTRUCTION  
 Depth Drilled 160 Feet Depth Cased 160 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 12 Inches To 0 Feet 160 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8 5/8	16.94	.188	0	160

Perforations:  
 Type perforation Torch Cut  
 Size perforation 1/4" width 8" long  
 From 120 feet to 160 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 50'  Neat Cement  
 Placement Method:  Pumped  Poured  Cement Grout  Concrete Grout  
 Gravel Packed:  Yes  No  
 From 50 feet to 160 feet

9. WATER LEVEL  
 Static water level 58' feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started JANUARY 11, 1999  
 Date completed JANUARY 11, 1999

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 checked="" type="checkbox"/> Air Lift	20	4	1/4

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name JIM PIKE WELL DRILLING, LLC Contractor  
 Address P.O. BOX 56 PAHRUMP, NV. 89041 Contractor  
 Nevada contractor's license number issued by the State Contractor's Board 47563A  
 Nevada driller's license number issued by the Division of Water Resources 1812  
 Signed [Signature] By driller performing actual drilling on site or contractor  
 Date JANUARY 14, 1999