

OFFICE USE ONLY
 Log No. **75035**
 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

NOTICE OF INTENT NO. **18740B**

1. OWNER **ANTHONY & LORENA GONZALES** ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS _____ **3190 W. BASIN RD.**

2. LOCATION **SE 1/4 SE 1/4 Sec 12 T 20-S N/S R 52 E NYE** County _____
 PERMIT NO. _____ **27-541-07** N/A
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
Surface		0	4	4
Grey Clay		4	36	32
Brown Clay		36	52	16
Brown Clay/Caliche	X	52	78	26
Brown Clay		78	94	16
Brown Clay/Caliche		94	112	18
Brown Clay	X	112	140	28

8. WELL CONSTRUCTION
 Depth Drilled **140** Feet Depth Cased **140** Feet
 HOLE DIAMETER (BIT SIZE)
 From To
12 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)
8 5/8	16.94	.188	0	140

Perforations:
 Type perforation **Torch Cut**
 Size perforation **1" width 8" long**
 From **1.00** feet to **140** feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal **50'** Neat Cement
 Placement Method: Pumped Concrete Grout
 Poured
 Gravel Packed: Yes No
 From **50'** feet to **140** feet

9. WATER LEVEL
 Static water level **46** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started **MAY 3**, 1999
 Date completed **MAY 3**, 1999

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
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** Contractor
PAHRUMP, NV. 89041
 Nevada contractor's license number issued by the State Contractor's Board **17563A**
 Nevada driller's license number issued by the Division of Water Resources the on-site driller **1812**
 Signed _____
 By driller performing actual drilling on site or contractor
 Date **MAY 7, 1999**

