

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

OFFICE USE ONLY
 Log No. **75076**
 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. 18135

1. OWNER **Badly Scattered Land and Equipment** ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS **c/o 2301 Winery Road # 2** **4211 West Veniza**
Pahrump, NV 89048

2. LOCATION **SW 1/4 SE 1/4 Sec. 26 T 20S N/S R 52E E Nye** County _____
 PERMIT NO. _____ Parcel No. **28-612-28** Subdivision Name _____
 Issued by Water Resources _____

3. WORK PERFORMED
 New Well Replace Recondition Domestic Irrigation Test Cable Rotary RVC
 Deepen Abandon Other _____ Municipal/Industrial Monitor Stock Air Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Brown Clay		0	2	2
Light Gray Clay		2	25	23
Gray Loam		25	38	13
Light Gray Loam		38	48	10
Brown Clay and Gray Loam		48	66	18
Gray Loam	x	66	78	12
Clay	x	78	85	7
Gray Calache	x	85	98	13
Gray Calache	x	98	120	22
Calache	x	120	140	20

8. WELL CONSTRUCTION
 Depth Drilled **140** Feet Depth Cased **110** 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	.188	.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:
 Depth of Seal **50** Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

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

Date started **3/18/99** _____ 19____
 Date completed **3/18/99** _____ 19____

7. WELL TEST DATA

TEST METHOD:	Bailer	Pump	Air Lift
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
.5	n/a	.50	

9. WATER LEVEL
 Static water level **60** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **Cool** °F Quality **Good**

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 *Randy Strickland*
 By driller performing actual drilling on-site or contractor
 Date **3.24.99**

