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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. **18702**

1. OWNER **KERSHNER, REED** ADDRESS AT WELL LOCATION **171 N LINDA**
 MAILING ADDRESS **171 N LINDA**
PAHRUMP, NV 89048

2. LOCATION **SW 1/4 SW 1/4 Sec. 9 T 20S N/S R 53E E NYE** County
 PERMIT NO. **36-183-13** **CAL VEGAS RANCHOS** 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	Thickness
CLAY		0	65	
CALICHIE	WB	65	74	9
CLAY		74	89	15
CALICHIE	WB	89	102	13
CLAY		102	113	11
CALICHIE	WB	113	125	12
CLAY		125	134	9
CALICHIE	WB	134	140	6

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

HOLE DIAMETER (BIT SIZE)
 From **10.25** Inches To **140** Feet
 _____ Inches _____ Feet
 _____ Inches _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6.625	3.63	.280	0	140

Perforations:
 Type perforation **SAW CUT**
 Size perforation **1/8 X 3**

From	To
100 feet	140 feet
100 feet	140 feet
_____ feet	_____ feet
_____ feet	_____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal **50**
 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 **51** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

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 D...*
 By driller performing actual drilling on-site or contractor
 Date **4/12/99**

Date started **4/5/99**, 19__
 Date completed **4/9/99**, 19__

7. WELL TEST DATA

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

