

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

OFFICE USE ONLY  
Log No. **76494**  
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. **19411**

1. OWNER **CARLO, TERESA** ADDRESS AT WELL LOCATION **4100 JAYBIRD**  
MAILING ADDRESS **4100 JAYBIRD**  
**PAHRUMP, NV 89048**

2. LOCATION **SE 1/4 SE 1/4 Sec. 26 T 20S** N/S R **52E E** County **NYE**  
PERMIT NO. **28-611-08** **VEGAS ACRES**  
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
CLAY & CALICHIE		0	67	
CALICHIE	WB	67	81	14
CLAY		81	96	15
CALICHIE	WB	96	111	15
CLAY		111	118	7
CALICHIE	WB	118	131	13
CLAY		131	140	9

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

HOLE DIAMETER (BIT SIZE)  
From **0** Feet To **140** Feet  
**10.25** Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
\_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
\_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

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

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

From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No  
Depth of Seal **50**

Placement Method:  Pumped  Poured  
Seal Type:  Neat Cement  Cement Grout  Concrete Grout

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

9. WATER LEVEL  
Static water level **53** 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 **47333**  
Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1642**  
Signed *Thomas De...*  
By driller performing actual drilling on-site or contractor  
Date **9/9/99**

Date started **8/9/99**, 19\_\_\_\_  
Date completed **8/13/99**, 19\_\_\_\_

7. WELL TEST DATA

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