

STATE OF NEVADA  
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY  
 Log No. **77899**  
 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. **19877**

1. OWNER **WARBURTON, THOMAS** ADDRESS AT WELL LOCATION **3391 Z STREET**  
 MAILING ADDRESS **3391 Z STREET**  
**PAHRUMP, NV 89048**

2. LOCATION **SE** 1/4 **NW** 1/4 Sec. **36** T **20S** N/S R **52E** E **NYE** County  
 PERMIT NO. \_\_\_\_\_ Parcel No. **27-611-18** 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
CLAY		0	17	
CALICHIE		17	24	7
CLAY		24	36	12
CALICHIE		36	42	6
CLAY		42	52	10
CALICHIE		52	54	2
CLAY		54	68	14
CALICHIE	WB	68	72	4
CLAY		72	88	16
GRAVEL	WB	88	145	57

8. WELL CONSTRUCTION  
 Depth Drilled **145** Feet Depth Cased **145** Feet

HOLE DIAMETER (BIT SIZE)  
 From To  
**10.25** Inches **0** Feet **145** Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Flt (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>6.625</b>	<b>3.63</b>	<b>.280</b>	<b>0</b>	<b>145</b>

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

From **105** feet to **145** 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 **145** feet

9. WATER LEVEL  
 Static water level **52** 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

Date started **12/15/99**, 19\_\_\_\_  
 Date completed **12/17/99**, 19\_\_\_\_

7. WELL TEST DATA

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

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 Dan*  
 By driller performing actual drilling on-site or contractor

Date **12/17/99**


