

STATE OF NEVADA
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY
 Log No. 83644
 Permit No. _____
 Basin 102



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. 22304

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

1. OWNER Dave McCoy ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 7320 S. Parkridge 3720 S. Parkridge
Pahrump, NV 89048

2. LOCATION SE 1/4 SW 1/4 Sec. 36 T 20S N/S R 53E E Nye County _____
 PERMIT NO. 41-124-16 Calvada Valley Subdivision Name _____
 Issued by Water Resources Parcel No. _____

3. WORK PERFORMED 4. PROPOSED USE 5. WELL TYPE

X 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	Thick-ness
brown caleche		0	8	8
See next line		8	12	4
brown loam with caleche strings				
brown caleche		12	24	12
brown loam		24	26	2
brown caleche		26	52	26
brown loam	x	52	127	11
See next line	x	127	168	41
brown loam with caleche strings				

8. WELL CONSTRUCTION

Depth Drilled 168 Feet Depth Cased 168+1 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
<u>11</u>	<u>0</u>	<u>168</u>	<u>168</u>	<u>168</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>3.7</u>	<u>.280</u>	<u>0</u>	<u>168</u>
_____	_____	_____	_____	_____

Perforations:

Type perforation sawcut
 Size perforation .188

From 145 feet to 168 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 168 feet

9. WATER LEVEL

Static water level 73 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cool °F Quality good

Date started 7/6/01 _____ 19____
 Date completed 7/6/01 _____ 19____

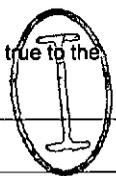
7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
_____	_____	_____
_____	_____	_____

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 [Signature] By driller performing actual drilling on-site or contractor
 Date 7-16-01

