

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

OFFICE USE ONLY
 Log No. 83645
 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. 22305

1. OWNER **Butch Borasky**
 MAILING ADDRESS **1380 W. Gamebird Pahrump, NV 89048**
 ADDRESS AT WELL LOCATION **1380 W. Gamebird**

2. LOCATION **SE 1/4 SE 1/4 Sec. 32 T 20S N/S R 53E E Nye** County
 PERMIT NO. **40-595-17** Parcel No. _____ Subdivision Name _____
 Issued by Water Resources _____

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
brown clay		0	12	12
See next line		12	18	6
brown clay with caleche strings				
See next line		18	27	9
grey clay with caleche strings				
See next line	x	27	139	112
brown clay with light caleche				
brown clay	x	139	144	5
brown caleche	x	144	149	5
See next line	x	149	167	18
brown clay with caleche strings				

8. WELL CONSTRUCTION
 Depth Drilled 167 Feet Depth Cased 167+1 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
<u>11</u>	0	167		

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>167</u>

Perforations:
 Type perforation **sawcut**
 Size perforation **.188**

From	feet to	feet
<u>140</u>	<u>167</u>	

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Depth of Seal 50

Placement Method: Pumped Poured

Gravel Packed: Yes No
 From 50 feet to 167 feet

9. WATER LEVEL
 Static water level 70 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **cool** °F Quality **good**

Date started 7/5/01 19____
 Date completed 7/5/01 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 **2066**

Signed _____
 By driller performing actual drilling on-site or contractor
 Date 7.16.01


