WHITE - DIVISION OF WATER RESOURCES
CANARY - CLIENT'S COPY
PINK - WELL DRILLER'S COPY

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

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

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

OFFICE USE ONLY
Log No. 88449
Permit No. 19453
Basin 162

NOTICE OF INTENT NO. 24743

1. OWNER DAVID SWAIN
MAILING ADDRESS 6200 S. ELIZABETH
PAHRUMP, NV 89048

ADDRESS AT WELL LOCATION 6200 S. ELIZABETH

2. LOCATION SW 1/4 NE 1/4 Sec. 14 T 21S N/S R 53 E NYE County
PERMIT NO. 19453 (Issued by Water Resources) 44-621-39 (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
PERFORATED WELL		200	10	-190
PUMP IN 20 YARDS OF				
NEAT CEMENT WITH 2%				
BENTOMIT THOUGH 2 INCH				
TRIMIE PIPE FROM				
BOTTOM				

DCNR/DWR
RECEIVED
APR 0 3 2003
LAS VEGAS OFFICE

Date started 2/21/2003, 19__
Date completed 2/25/2003, 19__

7. **WELL TEST DATA**
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

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

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

HOLE DIAMETER (BIT SIZE)

	From	To
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)
14			0	200

Perforations:
Type perforation MILLS KNIFE
Size perforation 1/2 X 3
From 200 feet to 10 feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: ☐ Yes ☒ No
Depth of Seal
Placement Method: ☐ Pumped ☐ Poured
Seal Type: ☒ Neat Cement ☐ Cement Grout ☐ Concrete Grout
Gravel Packed: ☐ Yes ☒ No
From ____ feet to ____ feet

9. **WATER LEVEL**
Static water level ____ 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 1426
Signed (By driller performing actual drilling on-site or contractor)
Date 4/2/03

USE ADDITIONAL SHEETS IF NECESSARY