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. 100012
Permit No.
Basin 203

NOTICE OF INTENT NO. 28280

1. OWNER Michael + Sherry Mead
MAILING ADDRESS P.O Box 693
Goodsprings NV 89019

ADDRESS AT WELL LOCATION #12 LLoyd Circle and Carrigan Ave. 7 miles N Caliente mile marker 99 US93

2. LOCATION S/E ¼ S/E ¼ Sec. 11 T. 3 N (S) R. 67 E. Lincoln County

PERMIT NO. ____ Issued by Water Resources | 013-160-41 Parcel No. | Carrigan 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
Sand-Gravel		0	40	40
Sand-Boulders		40	60	20
Clay-Gravel-Boulders	X	60	168	108
Clay		168	170	2

DCNR/DWR
RECEIVED
JUN 20 2006
LAS VEGAS OFFICE

Date started 5-16-06, 20
Date completed 5-17-06, 20

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

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
70		2

8. WELL CONSTRUCTION
Depth Drilled 170 Feet Depth Cased 170 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
10 5/8 Inches	0 Feet	170 Feet
Inches	Feet	Feet
Inches	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 1/2	PVC	Sch 40	0	170

Perforations:
Type perforation saw cut
Size perforation 1/8" x 4"
From 70' feet to 170 feet
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 170 feet

9. WATER LEVEL
Static water level 53 feet below land surface
Artesian flow ____ G.P.M. ____ P.S.I.
Water temperature cold °F Quality good

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Davis Drilling + Pumps (Contractor)
Address HC 61 Box 54 (Contractor)
Hiko NV 89017
Nevada contractor's license number issued by the State Contractor's Board 0028966
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1191
Signed [signature] By driller performing actual drilling on site or contractor
Date 5-20-06

(Rev. 12-01) USE ADDITIONAL SHEETS IF NECESSARY (O)-627