

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

OFFICE USE ONLY
Log No. 118150
Permit No. 81254
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. 36262

1. OWNER WILLIAM LYON HOMES, INC
MAILING ADDRESS 500 PILOT RD
PAHRUMP NV 89048

ADDRESS AT WELL LOCATION 4750 S MT. FALLS PKWY
PAHRUMP

Subdivision Name: _____ County: NYE

2. LOCATION SE 1/4 NE 1/4 Sec 4 T 21S N/S R 54 E Latitude N36°09'14.1" UTM NAD 27
PERMIT/WAIVER No. 81254 45-021-62 Longitude W116°54'24.2" N NAD 83/WGS 84

Issued by Water Resources Parcel No. _____

3. WORKED PERFORMED
 New Well Replace Recondition
 Deepen Other

4. PROPOSED USE REC-803
 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
SILT		0	70	70
SOFT GREEN CLAY & GRAVEL		70	90	20
BROWN CLAY & GRAVEL		90	390	300
FRACTURED ROCK	WB	390	420	30
CLAY & GRAVEL		420	460	40
HEAVY CLAY & GRAVEL		460	590	130
FRACTURED ROCK	WB	590	650	60
FRACTURED ROCK & CLAY		650	720	30
FRACTURED ROCK	WB	720	805	85
FRACTURED ROCK	WB	805	960	155

DCNR/DWR/SNBO
RECEIVED
SEP 30 2013

9. WELL CONSTRUCTION

Depth Drilled 960 Feet Depth Cased 960 Feet

HOLE DIAMETER (BIT SIZE)

	From	To		
	0	113	Feet	Feet
<u>22</u>	Inches			
<u>12-1/4</u>	Inches	113	Feet	805
<u>7-7/8</u>	Inches	805	Feet	960

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
14	36.75	.375	0	113
8	22.38	.250	0	805
6	17.04	.250	790	960

Perforations: MILL SLOT

Type of perforation _____
Size of perforation 100

From 504 feet to 960 feet
From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement _____ to _____ Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout 0 to 113 Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: Yes No 113 to 805 Pumped Poured
Type: CONCRETE

Bentonite Chips: Yes No _____ to _____ Pumped Poured
Type: _____

Date started: 21-Aug, 20 13
Date completed: 11-Sep, 20 13

7. Water Level

Static water level: FLOWING feet below land surface
Artesian Flow: 300+ G.P.M. _____ P.S.I.
Water Temperature: COOL °F
Quality: _____

8. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> 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 GREAT BASIN DRILLING
Contractor

Address 1220 MANSE RD
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 [Signature]
By driller performing actual drilling on site or contractor

Date 9/12/2013