

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

OFFICE USE ONLY
Log No. 118612
Permit No. _____
Basin 207

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. 71115

1. OWNER David Gibson
MAILING ADDRESS Po Box 203
Lund, NV 89317
2. LOCATION NE 1/4 NW 1/4 Sec 19 T 10 N R 61 E
PERMIT/WAIVER No. 013-681-05
Issued by Water Resources Parcel No. _____

ADDRESS AT WELL LOCATION Hwy. 318 Gibson Rd.
Subdivision Name: N/A County: Nye
Latitude N 38° 43.15' UTM E NAD 27
Longitude W 115° 09.866' NAD 83/WGS 84

3. WORKED PERFORMED
 New Well Replace Recondition
 Deepen 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
Aikilin soil		0	3	3
Clay - sand		3	25	22
White Clay		25	30	5
Brown Clay - Small Gravel	X	30	40	10
Clay - Sand		40	50	10
Brown Clay		50	65	15
Clay - Small Gravel		65	75	10
Clay - Coarse Gravel	X	75	100	25
Brown Clay		100	110	10
Brown Clay		110	130	20

2013 DEC - 6 AM 11:00
STATE ENGINEERS OFFICE

9. WELL CONSTRUCTION
Depth Drilled 130' Feet Depth Cased 130' Feet
HOLE DIAMETER (BIT SIZE)
From To
11" Inches 0 Feet 130' Feet
Inches Feet Feet
Inches Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8"</u>	<u>12.92</u>	<u>.188</u>	<u>+ 2</u>	<u>10'</u>
<u>6.625</u>	<u>7.95</u>	<u>5DR-17</u>	<u>10'</u>	<u>130'</u>

Perforations:
Type of perforation Slotted
Size of perforation .030
From 50' feet to 130' feet
From _____ feet to _____ feet

Annular Seal: Yes No
 Neat Cement 0 to 45' Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured
Gravel Pack: Yes No 50' to 130' Pumped Poured
Type: 3/8" MINERAL PAV. GRAVEL
Bentonite Chips: Yes No 45' to 50' Pumped Poured
Type: 4/8

Date started: 10-3, 20 13
Date completed: 10-16, 20 13

7. Water Level
Static water level: 35' feet below land surface
Artesian Flow: NO G.P.M. _____ P.S.I. _____
Water Temperature: Cold °F
Quality: Good

8. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift			
<u>Air</u>	<u>60</u>	<u>95'</u>	<u>2 hrs</u>

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name David Gibson contractor LLC
Address P.O. Box 203 Lund, NV 89317
D.B.A Gibson well Drilling
Nevada contractor's license number 0077887
issued by the State Contractor's Board
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1793
Signed [Signature]
By driller performing actual drilling on-site or contractor
Date 11-6-13

(Rev. 05-06)

USE ADDITIONAL SHEETS IF NECESSARY