

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

OFFICE USE ONLY
Log No. 119700
Permit No. _____
Basin 137B

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. 70910

1. OWNER Don Meighan ADDRESS AT WELL LOCATION 1555 San Antonio Road
MAILING ADDRESS HC 60 Box 34017 Round Tenopah Nev 89045
Mtn NV 89045 Subdivision Name: 8 County: NYE
2. LOCATION NW 1/4 NE 1/4 Sec 13 T 6 N R 40 E Latitude N 38° 23.07560 UTM E NAD 27
PERMIT/WAIVER No. 0 12-421-05 Longitude W 117° 25.57422 N NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

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
TOP Soil - Boulders		0	20	20
Boulders - Sand		20	85	65
Hard Rock		85	120	35
Clay - Boulders	X	120	140	20
Hard Rock		140	160	20
Sand - Gravel	X	160	165	5
Fractured Rock	X	165	200	35

7' of 5" steel casing was concreted over 6" PVC at surface

7. Water Level
Static water level: 98 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: 60.0 °F
Quality: GOOD

9. WELL CONSTRUCTION
Depth Drilled 200 Feet Depth Cased 200 Feet
HOLE DIAMETER (BIT SIZE)
From _____ To _____
11 Inches 0 Feet 200 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 1/2</u>	<u>PVC</u>	<u>Sch 40</u>	<u>0</u>	<u>200</u>

Perforations:
Type of perforation Saw cut
Size of perforation 1/4" x 3"
From 60 feet to 80 feet
From 100 feet to 140 feet
From 160 feet to 200 feet
From _____ feet to _____ feet

Annular Seal: Yes No
 Neat Cement _____ to _____ Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout 3 to 54 Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured
Gravel Pack: Yes No 54 to 200 Pumped Poured
Type: _____
Bentonite Chips: Yes No _____ to _____ Pumped Poured
Type: _____

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>45</u>	<u>2</u>	

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 and Pumps Contractor
Address HC 60 Box 54 Mtn NV Contractor
0028966
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 1297
Signed Mike Davis
By driller performing actual drilling on-site or contractor
Date 3-1-2014

OFFICE
1:52

(Rev. 05-08)

USE ADDITIONAL SHEETS IF NECESSARY