

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

OFFICE USE ONLY
 Log No. 120669
 Permit No. _____
 Basin He2

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. 33119

1. OWNER Bruce and Barbara Temple ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 1900 NE 3rd Street 2030 E. Shirley
Bend, OR 97701

2. LOCATION N/W 1/4 N/W 1/4 Sec. 1 T 22S N/S R 53E E Nye County
 PERMIT NO. 41-371-20 Calvada Unit 14
 Issued by Water Resources 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	Thick-ness
brown loam		0	12	12
brown caleche		12	18	6
brown loam		18	21	3
brown caleche		21	25	4
brown loam		25	46	21
brown caleche		46	81	35
brown loam	x	81	181	100
Trace Amount Pea Gravel	x	181	190	9
brown caleche	x	190	228	38
brown loam	x	228	245	17
brown caleche	x	245	261	16
See next line	x	261	274	13
brow loam with caleche strings				
brown caleche	x	274	287	13
brown loam	x	287	310	23

36° 04.255'N
 115° 58.956'W NAD 83

Date started 6/2/2014, 19____
 Date completed 6/4/2014, 19____

7. WELL TEST DATA

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

8. WELL CONSTRUCTION
 Depth Drilled 310 Feet Depth Cased 305+1 Feet
 HOLE DIAMETER (BIT SIZE)
 From 11 Inches To 0 Feet 310 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/FL (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	3.7	.280	0	305

 Perforations:
 Type perforation sawcut
 Size perforation .188
 From 20 feet to 60 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 50 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 50 feet to 305 feet

9. WATER LEVEL
 Static water level 115 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cool °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 Strickland Construction Co., Inc. Contractor
 Address 5801 S. Homestead Contractor
Pahrump, NV 89048
 Nevada contractor's license number issued by the State Contractor's Board 40277
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller, 2086
 Signed _____ By driller performing actual drilling on-site or contractor
 Date 6.5.14

36.070977 NAD
 -115.9734001 27

DCNR/DWR/SNBO
 RECEIVED

JUN 09 2014