

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

OFFICE USE ONLY
Log No. 125702
Permit No. _____
Basin No. _____

PRINT OR TYPE IN BLACK INK 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. 34623
WELL NAME (if applicable): _____

1. OWNER/CLIENT NAME Wayne & Darla Holt
MAILING ADDRESS P O Box 1777
Pahrump, NV 89041

DETAILED ADDRESS AT WELL LOCATION _____
2420 N. Linda St.
Subdivision Name Rancho Del Sol Ut:7,Blk:2, Lot:3 County Nye

2. PLS LOCATION NE 1/4 SE 1/4 32 Sec 19-S N/S 53 E
PERMIT/WAIVER NO. _____ 29-811-03
Issued by Water Resources Current Parcel No.

Latitude 36.255354° UTM E NAD 27
Longitude -116.033626° UTM N NAD 83 WGS 84

3. WORKED PERFORMED
 New Well Deepen: Orig WL# _____
 Replacement: Original well log # _____
 Recondition: Original well log # _____

4. PROPOSED USE
 Domestic Irrigation Monitor
 Mining / Dewater Com / Ind Stock
 Test / Other Man / OM Rec

5. WELL TYPE
 Auger Rotary RVC
 Air Mud Sonic
 Other

6. LITHOLOGIC LOG

Material Encountered	Lost Circ.	Water Strata	From	To
Surface			0	4
Brown Clay			4	31
Brown Clay & Caliche			31	55
Brown Clay			55	83
Brwon Clay & Caliche		X	83	150

9. WELL CONSTRUCTION
Depth Drilled: 150 Feet Depth Cased: 150 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To
<u>10</u>	<u>0</u>	<u>150</u>

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>3.92</u>	<u>.28</u>	<u>0</u>	<u>150</u>

DCNR/DWR/SNDC
RECEIVED
JUL 12 2016

ANNULAR MATERIALS
Sanitary Seal Yes No
 Neat Cement _____ to _____ Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout 0 to 50 Pumped Poured
 Bentonite Chips _____ to _____ Pumped Poured
 Gravel Pack [> 0.2 in.] 50 to 150 Pumped Poured
 Sand Pack [< 0.2 in.] _____ to _____ Pumped Poured
 Other, explain: _____ to _____ Pumped Poured

PERFORATIONS:
Type of perforation: Saw Cut
Size of perforation: 1/4" width 3" long
From 110 Feet To 150 Feet
From _____ Feet To _____ Feet
From _____ Feet To _____ Feet
From _____ Feet To _____ Feet

Date started: 29-Jun 20 16
Date completed: 30-Jun 20 16

7. WATER QUALITIES
Static water level: 68 Feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: 65 ° Fahrenheit
Water Quality: _____

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.

Name Jim Pike Well Drilling, LLC Contractor
Address P O Box 56 Pahrump, NV 89041 Contractor

Phone (775) 727-5435
Nevada contractor's license number _____
as issued by the State Contractor's Board: 17563A
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site title): _____
1324

8. WELL TEST DATA

Test Method:	G.P.M.	Draw Down (Feet Below Static)	Recorded Time (Hours)
<input type="checkbox"/> Baller <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			

Signed: Jim Pike
By driller performing actual drilling on site or contractor
Date: July 5, 2016

NAD27 36.2553945
-116.0327643