

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

Log No. 37634
 Permit No. 25268
 Basin 162

NOTICE OF INTENT NO. 9543

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

Unincorporated Town of Pahump
 1. OWNER Nye County Cemetery ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS _____

2. LOCATION NE 1/4 SW 1/4 Sec. 14 T. 20S N/S R. S3 E. Nye County
 PERMIT NO. 25268 Issued by Water Resources Parcel No. 38-271-13 Subdivision Name Nye County

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
<u>130 Clay</u>		<u>130</u>	<u>140</u>	<u>10</u>
<u>Caliche</u>	<u>wB</u>	<u>140</u>	<u>144</u>	<u>4</u>
<u>Clay/caliche</u>		<u>144</u>	<u>165</u>	<u>21</u>
<u>Caliche</u>	<u>wB</u>	<u>165</u>	<u>170</u>	<u>5</u>
<u>Clay</u>		<u>170</u>	<u>183</u>	<u>13</u>
<u>Caliche</u>	<u>wB</u>	<u>183</u>	<u>186</u>	<u>3</u>
<u>Clay</u>		<u>186</u>	<u>192</u>	<u>6</u>
<u>caliche</u>	<u>wB</u>	<u>192</u>	<u>196</u>	<u>4</u>
<u>Clay</u>		<u>196</u>	<u>212</u>	<u>16</u>
<u>caliche</u>	<u>wB</u>	<u>212</u>	<u>215</u>	<u>3</u>
<u>Clay</u>		<u>215</u>	<u>220</u>	<u>5</u>

Well was collapsed at 130 ft
 Drilled new hole and installed
 6" liner

8. WELL CONSTRUCTION

Depth Drilled 220 Feet Depth Cased 220 Feet

HOLE DIAMETER (BIT SIZE)

From		To	
Inches	Feet	Inches	Feet
<u>7 7/8</u>	<u>130</u>	<u>220</u>	<u>220</u>

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 3/8</u>	<u>12.92</u>	<u>.183</u>	<u>120</u>	<u>220</u>

Perforations:
 Type perforation Factory Saw cut
 Size perforation 1/2 x 3"
 From 130 feet to 200 feet
 From 140 feet to 160 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Placement Method: Pumped
 Poured
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 60 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

RECEIVED
 MAR 27 1992
 Div. of Water Resources
 Branch Office - Las Vegas, NV

Date started 3-23 1992
 Date completed 3-24 1992

7. WELL TEST DATA

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

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 Co Inc Contractor
 Address HCR 78 Box 20358 Contractor
Pahump NV 89041
 Nevada contractor's license number issued by the State Contractor's Board 30880
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1642
 Signed Thomas Dan
 By driller performing actual drilling on site or contractor
 Date 3-24-92