



OFFICE USE ONLY
 Log No. 40425
 Permit No. _____
 Basin 162

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

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

NOTICE OF INTENT NO. 10322

1. OWNER Bill Moore ADDRESS AT WELL LOCATION 7878 Nye & Woodchips
 MAILING ADDRESS _____
 2. LOCATION NE 1/4 NE 1/4 Sec 30 T. 19S N13 R. 53 E Nye County _____
 PERMIT NO. 29-481-06 VALLEY VIEW APRES Subdivision Name _____
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	Thickness
Standy clay		0	15	15
clay		15	30	15
caliche		30	32	2
clay		32	55	23
caliche		55	58	3
clay		58	74	16
caliche		74	74	4
clay		74	90	12
caliche		90	93	3
clay		93	100	7

8. WELL CONSTRUCTION
 Depth Drilled 100 Feet Depth Cased 100 Feet
 HOLE DIAMETER (BIT SIZE)
 From 0 To 100 Feet
12 1/4 Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8 7/8</u>	<u>16.94</u>	<u>1.88</u>	<u>0</u>	<u>100</u>

Perforations:
 Type perforation Factory Saw Cut
 Size perforation 1/8 x 3/8
 From 80 feet to 100 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal 50
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 50 feet to 100 feet

RECEIVED

JAN 08 1993

Div. of Water Resources
 Branch Office - Las Vegas, NV

Date started 10-20, 1992
 Date completed 10-23, 1992

7. WELL TEST DATA

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

9. WATER LEVEL
 Static water level 51 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

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 Contractor
 Address HER 78 Box 80358 Contractor
Pahrump 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 10-25-92