

WELL DRILLER'S REPORT

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

OFFICE USE ONLY  
 Log No. **45920**  
 Permit No. \_\_\_\_\_  
 Basin **162**

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

NOTICE OF INTENT NO. **14237**

1. OWNER **Bill Moore** ADDRESS AT WELL LOCATION  
 MAILING ADDRESS **107212 Palm St**  
 2. LOCATION **NW 1/4 SW 1/4 Sec. 19 T. 19S N/S R. 53 E. NYE** County  
 PERMIT NO. **29-432-16** Parcel No. **Valley View ACRES** 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
Clay		0	5	5
Caliche		5	8	3
Clay		8	19	11
Caliche		19	22	3
Clay		22	31	9
Caliche		31	33	2
Clay		33	40	7
Caliche		40	44	4
Clay		44	50	6
Caliche	WB	50	57	7
Clay		57	66	9
Caliche	WB	66	68	2
Clay		68	80	12
Caliche	WB	80	87	7
Clay		87	94	7
Caliche	WB	94	100	6

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

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>6 5/8</b>	<b>12.92</b>	<b>.188</b>	<b>0</b>	<b>100</b>

Perforations:  
 Type perforation **Factory saw cut**  
 Size perforation **1 1/2 x 3**  
 From **80** feet to **100** 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 **100** feet

RECEIVED  
 NOV 15 1994  
 Div. of Water Resources  
 Branch Office - Las Vegas, NV

Date started **November 3** 19**94**  
 Date completed **November 4** 19**94**

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

9. WATER LEVEL  
 Static water level **50** 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 **HCR 78 Box 20358** Contractor  
**Pahrump NV 89041**  
 Nevada contractor's license number **30880** issued by the State Contractor's Board  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1642**  
 Signed **Thomas D...**  
 By driller performing actual drilling on site or contractor  
 Date **11/4/94**