

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

Log No. 46764
 Permit No. _____
 Basin _____
 NOTICE OF INTENT NO. 14175

1. OWNER John Wharton ADDRESS AT WELL LOCATION 6420 S. Oakridge Ave.
 MAILING ADDRESS _____
 2. LOCATION SE 1/4 NW 1/4 Sec. 13 T 21-S N/S R 53 E Nye County
 PERMIT NO. 44-592-08 Conestoga Country Est.
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
Surface		0	4	4
Brown clay		4	22	18
Gray clay		22	45	23
Brown clay/caliche		45	54	9
Brown clay	X	54	102	48
Gray clay		102	110	8
Brown clay	X	110	126	16
Gray clay/caliche	X	126	140	14

8. WELL CONSTRUCTION
 Depth Drilled 140 Feet Depth Cased 140 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
12 Inches 0 Feet 140 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8 5/8	16.94	.188	0	140

RECEIVED
 NOV 22 1994
 Div. of Water Resources
 Branch Office - Las Vegas, NV

Perforations:
 Type perforation Factory Cut
 Size perforation 1/8" width 3" long (8 rolls)
 From 120 feet to 140 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 140 feet

Date started Nov. 2, 1994
 Date completed Nov. 2, 1994

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift			
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
20	4	1/4	

9. WATER LEVEL
 Static water level 56 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 JIM PIKE WELL DRILLING, LLC Contractor
 Address P.O. Box 56 Contractor
Pahrump, NV 89041
 Nevada contractor's license number issued by the State Contractor's Board 17563
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1812
 Signed Will A. Payne
 By driller performing actual drilling on site or contractor
 Date Nov. 8, 1994