



WHITE-DIVISION OF WATER RESOURCES
 CANARY-CLIENT'S COPY
 PINK-WELL DRILLER'S COPY

STATE OF NEVADA
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY
 Log No. **48009**
 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. **17036**

1. OWNER **Michael Couture** ADDRESS AT WELL LOCATION **4851 Turner**
 MAILING ADDRESS _____
 2. LOCATION **NE 1/4 NE 1/4 Sec 29 T 21S N/S R 54 E Nye** County
 PERMIT NO. **45-331-25** Parcel No. _____ Subdivision Name **Green Saddle ranch**

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		175	210	35
caliche	WB	210	216	6
clay		216	246	30
caliche	WB	246	251	5
clay		251	274	23
caliche	WB	274	278	4
clay		278	294	16
caliche	WB	294	310	16
clay		310	320	10

8. WELL CONSTRUCTION
 Depth Drilled **320** Feet Depth Cased **320** Feet
 HOLE DIAMETER (BIT SIZE)
 From **7 7/8** Inches To **1 7/8** Feet **320** Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 3/8	12.42	.188	175	320

Perforations:
 Type perforation **Torch cut**
 Size perforation **1/2 x 5**
 From **175** feet to **320** feet
 From _____ feet to _____ feet

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

9. WATER LEVEL
 Static water level **15ft** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started **7-31** 19**95**
 Date completed **8-4** 19**95**

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** Contractor
 Address **Her 78 Box 80358** Contractor
Pahrump NV 89041
 Nevada contractor's license number issued by the State Contractor's Board **30886**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1642**
 Signed **Thomas Dan**
 Driller performing actual drilling on site or contractor
 Date **8-5-95**

