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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. **15034**

1. OWNER **Jack Castaneda** ADDRESS AT WELL LOCATION **4430 E. Savoy Blvd.**  
 MAILING ADDRESS \_\_\_\_\_  
 2. LOCATION **SE 1/4 NW 20** T. **213** N/S R. **54** E. **Nye** County  
 PERMIT NO. **45-284-29** 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		0	6	6
Caliche		6	8	2
Clay		8	14	6
Caliche		14	16	2
Clay		16	31	15
Caliche		31	33	2
Clay		33	39	6
Caliche		39	44	5
Clay		44	52	8
Caliche	WB	52	55	3
Clay		55	64	9
Caliche	WB	64	66	2
Clay		66	77	11
Caliche	WB	77	79	2
Clay		79	89	10
Caliche	WB	89	93	4
Clay		93	101	8
Caliche	WB	101	104	3
Clay		104	116	12
Caliche	WB	116	118	2
Clay		118	125	7
Caliche	WB	125	127	2
Clay		127	136	9
Caliche	WB	136	140	4

8. WELL CONSTRUCTION  
 Depth Drilled **140** Feet Depth Cased **140** Feet  
 HOLE DIAMETER (BIT SIZE)  
 From **12 1/4** Inches To **1 1/2** Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

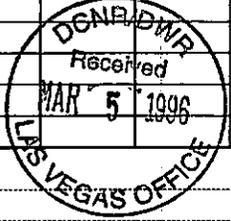
CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>8 7/8</b>	<b>16.94</b>	<b>.188</b>	<b>0</b>	<b>140</b>

Perforations:  
 Type perforation **Factory Saw cut**  
 Size perforation **1/8" x 3 1/2"**  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From **100** feet to **120** feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ 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

9. WATER LEVEL  
 Static water level: **52** feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started **February 19** 19**96**  
 Date completed **February 21** 19**96**



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 **P.O. Box 4220**  
**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 Pen**  
 By driller performing actual drilling on site or contractor  
 Date **2-27-96**