

STATE OF NEVADA  
 DIVISION OF WATER RESOURCES  
 WELL DRILLER'S REPORT

OFFICE USE ONLY  
 Log No. **73038**  
 Permit No. \_\_\_\_\_  
 Basin **162**

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

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

NOTICE OF INTENT NO. **18334**

1. OWNER **BROWN, LARRY** ADDRESS AT WELL LOCATION **3201 S PARKRIDGE**  
 MAILING ADDRESS **3201 S PARKRIDGE**  
**PAHRUMP, NV 89048**

2. LOCATION **NW 1/4 NE 1/4 Sec. 36 T 20S** N/S R **53E E NYE** County  
 PERMIT NO. **41-022-02** **CALVADA VALLEY** Subdivision Name  
Issued by Water Resources Parcel No.

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
SANDY CLAY		0	40	
CLAY & CALICHIE		40	79	39
CALICHIE	WB	79	84	5
CLAY		84	116	32
CALICHIE	WB	116	123	7
CLAY		123	136	13
CALICHIE	WB	136	140	4

8. WELL CONSTRUCTION  
 Depth Drilled **140** Feet Depth Cased **140** Feet

HOLE DIAMETER (BIT SIZE)  
 From **0** To **140**  
**10.25** Inches Feet  
 \_\_\_\_\_ Inches Feet  
 \_\_\_\_\_ Inches Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>6.625</b>	<b>3.92</b>	<b>.280</b>	<b>0</b>	<b>140</b>

Perforations:  
 Type perforation **SAW CUT**  
 Size perforation **1/8 X 3**

From <b>100</b> feet to <b>140</b> feet
From _____ feet to _____ 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 **67** 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 CO. OF NEVADA, INC.** Contractor  
 Address **P.O. BOX 4220** Contractor  
**PAHRUMP, NV. 89048**  
 Nevada contractor's license number issued by the State Contractor's Board **030880**  
 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 **12/31/98**

Date started **9/29/98** . 19\_\_  
 Date completed **9/29/98** . 19\_\_

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			