

STATE OF NEVADA  
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY  
 Log No. 86521  
 Permit No. \_\_\_\_\_  
 Basin 162  
 NOTICE OF INTENT NO. 23292

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

1. OWNER **Nationwide**  
 MAILING ADDRESS **3080 W. Medicine Man Pahrump, NV 89048**  
 ADDRESS AT WELL LOCATION **3080 W. Medicine Man**  
 2. LOCATION **NE** 1/4 **NE** 1/4 Sec. **13** T **20S** N/S R **52E** E **Nye** County  
 PERMIT NO. **28-632-03** Issued by Water Resources Parcel No. \_\_\_\_\_ Subdivision Name **Charleston Park**

3. WORK PERFORMED  
 New Well  Replace  Recondition  Domestic  
 Deepen  Abandon  Other \_\_\_\_\_  Municipal/Industrial  Irrigation  Monitor  Test  Stock  
 5. WELL TYPE  
 Cable  Rotary  RVC  
 Air  Other \_\_\_\_\_

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
brown clay		0	3	3
grey clay		3	6	3
brown clay		6	42	36
grey clay	x	42	65	23
brown clay	x	65	160	95

8. WELL CONSTRUCTION  
 Depth Drilled **160** Feet Depth Cased **160+1** Feet  
 HOLE DIAMETER (BIT SIZE)  
 From \_\_\_\_\_ To \_\_\_\_\_  
**11** Inches **0** Feet **160** 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>3.7</b>	<b>.280</b>	<b>0</b>	<b>160</b>

Perforations:  
 Type perforation **sawcut**  
 Size perforation **.188**  
 From **140** feet to **160** 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 **160** feet

9. WATER LEVEL  
 Static water level **62** feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature **cool** °F Quality **good**

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name **Strickland Construction Co., Inc.** Contractor  
 Address **5801 S. Homestead** Contractor  
**Pahrump, NV 89048**  
 Nevada contractor's license number issued by the State Contractor's Board **40277**  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2086**  
 Signed *Larry Strickland*  
 By driller performing actual drilling on-site or contractor  
 Date **6-21-02**

DCNR/DWR  
 RECEIVED  
 JUN 27 2002  
 LAS VEGAS OFFICE

Date started **5/22/02** 19\_\_\_\_  
 Date completed **5/22/02** 19\_\_\_\_

7. WELL TEST DATA

TEST METHOD:	Bailer	Pump	Air Lift
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	