

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

OFFICE USE ONLY
 Log No. 86564
 Permit No. 162
 Basin

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. 22416

OWNER **NYE COUNTY**
 MAILING ADDRESS **1631 E MESQUITE AVE**
PAHRUMP, NV 89048

ADDRESS AT WELL LOCATION **1631 E MESQUITE AVE**

2. LOCATION **NW 1/4 NE 1/4 Sec. 2 T 20S**
 PERMIT NO. **R-1070** Parcel No. **35-011-07**

N/S R **53E** E **NYE** County

3. WORK PERFORMED
 New Well
 Replace
 Abandon
 Recondition
 Other

4. Domestic
 Municipal/Industrial

PROPOSED USE
 Irrigation
 Monitor
 Stock

5. WELL TYPE
 Test
 Cable
 Rotary
 RVC
 Air
 Other

6. LITHOLOGIC LOG

WELL CONSTRUCTION

Material	Water Strata	From	To	Thick-ness
SAND & GRAVEL		0	60	60
CEMENTED SAND & GRAVEL		60	140	80
CLAY & GRAVEL		140	175	35
GRAVEL	WB	175	179	4
CLAY & GRAVEL		179	185	6
GRAVEL	WB	185	216	31

Depth Drilled **220**

Feet Depth Cased **216**

Feet

HOLE DIAMETER (BIT SIZE)
 From **0** To **220**
 Inches Feet Feet Feet
 Inches Feet Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
5.563	14.62	.268	0	216

Perforations:

Type perforation **FACTORY SAW CUT**

Size perforation	From	feet to	feet to	feet to	feet to
1/8 X 3	189	209			

Surface Seal: Yes No

Seal Type: Neat Cement

Depth of Seal **160 FT**
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From **165** feet to **216** feet

9. WATER LEVEL

Static water level **167** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

DRILLER'S CERTIFICATION

10. 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 **47333**

Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1642**

Signed *Thomas Davis*
 By driller performing actual drilling on-site or contractor

Date **9/28/01**



Date started **9/24/2001** 19
 Date completed **9/27/2001** 19

7. WELL TEST DATA

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

USE ADDITIONAL SHEETS IF NECESSARY