

WDR

93276

OFFICE USE ONLY

93276

Log No.

Permit No.

Basin

162

NOTICE OF INTENT NO. 26373

USE ADDITIONAL SHEETS IF NECESSARY
STATE OF NEVADA
DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

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

DIVISION OF WATER RESOURCES
CLIENT'S COPY
WELL DRILLER'S COPY

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

1. OWNER **DONNA CAMBLIN**
MAILING ADDRESS **3330 W. DONNER ST**
PAHRUMP, NV

ADDRESS AT WELL LOCATION **3330 W. DONNER ST**

2. LOCATION **SW** 1/4 **NE** 1/4 Sec. **13** T **20**
PERMIT NO. **41-412-22**
Issued by Water Resources Parcel No.

N/S R **52** E **NYE** County
GOLDEN SPRINGS RANCH UNIT 1
Subdivision Name

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	25	25
CALICHE		25	38	13
CLAY		38	70	32
CALICHE	WB	70	76	6
CLAY		76	96	20
CALICHE	WB	96	106	10
CLAY		106	123	17
CALICHE	WB	123	135	12
CLAY		135	147	12
CALICHE	WB	147	160	13
CLAY		160	168	8
CALICHE	WB	168	180	12

8. WELL CONSTRUCTION

Depth Drilled **180** Feet Depth Cased **180** Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
10	0	180		

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6	3.63	.250	0	180

Perforations:
Type perforation **SAWCUT**
Size perforation **1/8 X 3**
From **100** feet to **180** feet
From _____ feet to _____ feet

Surface Seal: Yes No
Depth of Seal **50**
Placement Method: Pumped Poured
Seal Type: Neat Cement Cement Grout Concrete Grout
Gravel Packed: Yes No
From **50** feet to **180** feet

9. WATER LEVEL
Static water level **55** 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 **47333**
Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1426**
Signed *[Signature]*
By driller performing actual drilling on-site or contractor
Date **6/1/04**

CORRECTED
DCNR/DWR RECEIVED
JUN 14 2004
LAS VEGAS OFFICE

Date started **5/13/2004** 19
Date completed **5/15/2004** 19

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

USE ADDITIONAL SHEETS IF NECESSARY
 STATE OF NEVADA
 DIVISION OF WATER RESOURCES
 WELL DRILLER'S REPORT

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 Log No. **93276**
 Permit No. _____
 Basin **162**

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NOTICE OF INTENT NO. **26373**

1. OWNER **DONNA CAMBUN** ADDRESS AT WELL LOCATION **3380 W. DONNER ST**
 MAILING ADDRESS **3380 W. DONNER ST**
PAHRUMP, NV

2. LOCATION **SW 1/4 NE 1/4 Sec. 13 T 20 N/S R 52 E NYE** County
 PERMIT NO. **41-412-22** **GOLDEN SPRINGS RANCH UNIT 1**
 Issued by Water Resources Parcel No. Subdivision Name

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

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CALICHE	WB	123	135	12
CLAY		135	147	12
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CLAY		160	168	8
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DONR/DWR
RECEIVED
JUN 08 2004
LAS VEGAS OFFICE

8. WELL CONSTRUCTION
 Depth Drilled **180** Feet Depth Cased **180** Feet

HOLE DIAMETER (BIT SIZE)
 From **10** Inches To **0** Feet **180** Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
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 Contractor

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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 **1426**
 Signed *[Signature]*
 By driller performing actual drilling on-site or contractor
 Date **6/1/04**

Date started **5/13/2004**, 19____
 Date completed **5/15/2004**, 19____

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<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			