

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

OFFICE USE ONLY  
 Log No. **97288**  
 Permit No. **162**  
 Basin **162**  
 NOTICE OF INTENT NO. **28554**

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

1. OWNER **JAMES SULTZ** ADDRESS AT WELL LOCATION **3140 W HORN RD**  
 MAILING ADDRESS **3140 W HORN RD**  
**PAHRUMP, NV**  
 2. LOCATION **SE 1/4 NE 1/4 Sec. 13 T 20S** N/S R **52 E NYE** County  
 PERMIT NO. **41-411-28** **GOLDEN SPRING 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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
CLAY		0	5	5
CALICHE		5	12	7
CLAY		12	45	33
CALICHE	WB	45	63	18
CLAY		63	100	37
CALICHE	WB	100	117	17
CLAY		117	130	13
CALICHE	WB	130	146	16
CLAY		146	168	22
CALICHE	WB	168	180	12

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)
6	3.63	.250	0	180

Perforations:  
 Type perforation **SAWCUT**  
 Size perforation **1/8 X 3**  
 From **120** feet to **180** 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 **180** feet

9. WATER LEVEL  
 Static water level **53** 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 **7/25/2005**

Date started **7/14/2005**, 19\_\_\_\_  
 Date completed **7/14/2005**, 19\_\_\_\_

7. WELL TEST DATA

TEST METHOD:	<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift Draw Down (Feet Below Static)		Time (Hours)
	G.P.M.		

DCNR/DWR RECEIVED  
 AUG 05 2005  
 LAS VEGAS OFFICE