WHITE - DIVISION OF WATER RESOURCES
CANARY - CLIENT'S COPY
PINK - WELL DRILLER'S COPY

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

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

OFFICE USE ONLY
Log No. 97745
Permit No.
Basin 167

NOTICE OF INTENT NO. 28329

1. OWNER DESERT LUMBER
MAILING ADDRESS 4377 E DANDELION
PAHRUMP, NV

ADDRESS AT WELL LOCATION 4377 E DANDELION

2. LOCATION NE 1/4 NW 1/4 Sec. 32 T 20S N/S R 54E E NYE County
PERMIT NO. (Issued by Water Resources) 27-471-18 (Parcel No.) (Subdivision Name)

3. WORK PERFORMED
☐ New Well ☐ Replace ☐ Recondition
☐ Deepen ☐ Abandon ☒ Other PLUGGIN

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
PERFORATE WELL FROM				
230 TO SURFACE SEAL @				
50' PUMP BENTONITE				
EZ SEAL FROM 230 TO				
65' NEAT CEMENT FROM				
65' TO SURFACE.				

DCNR/DWR
RECEIVED
NOV 17 2005
LAS VEGAS OFFICE

Date started 11/9/2005 , 19__
Date completed 11/9/2005 , 19__

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

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

8. WELL CONSTRUCTION
Depth Drilled ____ Feet Depth Cased ____ Feet

HOLE DIAMETER (BIT SIZE)

	From	To
Inches	Feet	Feet
Inches	Feet	Feet
Inches	Feet	Feet

CASING SCHEDULE

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

Perforations:
Type perforation HOLTZ
Size perforation 1/4 X 2
From 230 feet to 50 feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: ☒ Yes ☐ No
Depth of Seal 230'
Placement Method: ☐ Pumped ☐ Poured
Seal Type: ☐ Neat Cement ☐ Cement Grout ☐ Concrete Grout
Gravel Packed: ☐ Yes ☒ No
From ____ feet to ____ feet

9. WATER LEVEL
Static water level ____ 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 ____ (By driller performing actual drilling on-site or contractor)
Date 11/10/2005

USE ADDITIONAL SHEETS IF NECESSARY