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WELL DRILLER'S REPORT

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

NOTICE OF INTENT NO: 2244

1. OWNER DAVID VOORHES ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS _____ LOT 387 SAVOY ST _____
 _____ PAHRUMP NV _____

2. LOCATION NE $\frac{1}{4}$ SW $\frac{1}{4}$ Sec 20 T 21S N/S R 54 E NYE County _____
 PERMIT NO. _____ GREEN SADDLE RANCH _____
 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	Thickness
CLAY		0	3	3
CALICHIE		3	7	4
CLAY		7	16	9
CALICHIE		16	18	2
CLAY		18	22	4
CALICHIE		22	27	5
CLAY		27	38	11
CALICHIE		38	43	5
CLAY		43	50	7
CALICHIE	WB	50	55	5
CLAY		55	65	10
CALICHIE	WB	65	67	2
CLAY		67	80	13
CALICHIE	WB	80	83	3
CLAY		83	94	11
CALICHIE	WB	94	96	2
CLAY		96	103	7
CALICHIE	WB	103	110	7
CLAY		110	124	14
CALICHIE	WB	124	128	4
CLAY		128	134	6
CALICHIE	WB	134	136	2
CLAY		136	140	4
		140		140

8. WELL CONSTRUCTION
 Depth Drilled 140 Feet Depth Cased 140 Feet

HOLE DIAMETER (BIT SIZE)
 From 12.25 Inches To 0 Feet 140 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
85 \ 8	16.9	.188	0	140

Perforations:
 Type perforation FACTORY SAW CUT
 Size perforation 1 \ 8 X 3"
 From 100 feet to 130 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
50 Depth of Seal _____
 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From 50 feet to 140 feet

9. WATER LEVEL
 Static water level 49 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 9-7-93 19_____
 Date completed 9-17-93 19_____

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

RECEIVED
 NOV 12 1993
 Div. of Water Resources
 Branch Office - Las Vegas, NV

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. INC.
 Contractor
 Address HCR 7B BOX 80358
PAHRUMP NV 89041
 Contractor
 Nevada contractor's license number 30880
 issued by the State Contractor's Board
 Nevada driller's license number issued by the 1642
 Division of Water Resources, the on-site driller
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 10-23-93