



PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

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 13721

1. OWNER WATSON PATTERSON ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS _____ LOT 143 DONNER ST
PAHRUMP NV 89041
 2. LOCATION SW 1/4 NW 1/4 Sec. 13 T. 20S N/S R 52 E NYE County _____
 PERMIT NO. _____ 28-713-12 CHARLESTON PARK RANCHOS
 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	8	8
CALICHIE		8	11	3
CLAY		11	33	22
CALICHIE		33	36	3
CLAY		36	51	15
CALICHIE	WB	51	55	4
CLAY		55	72	17
CALICHIE	WB	72	83	11
CLAY		83	97	14
CALICHIE	WB	97	100	3
CLAY		100	119	19
CALICHIE	WB	119	121	2
CLAY		121	126	5
CALICHIE	WB	126	131	5
CLAY		131	136	5
CALICHIE	WB	136	140	4
		140		140

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

HOLE DIAMETER (BIT SIZE)
 From To
12.25 Inches 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 1/8 X 3"
 From 100 feet to 120 feet
 From _____ feet to _____ feet
 From _____ feet to _____ 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 X feet to 140 feet

RECEIVED
 SEP 07 1994
 Div. of Water Resources
 Branch Office - Las Vegas, NV

9. WATER LEVEL
 Static water level 46 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started _____, 19____
 Date completed 8-4-94, 19____
8-6-94

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

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 78 BOX 80358 Contractor
PAHRUMP NV 89041
 Nevada contractor's license number issued by the State Contractor's Board 30880
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1642
 Signed Thomas D...
 By driller performing actual drilling on site or contractor
 Date 8-26-94