

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

OFFICE USE ONLY
 Log No. **71588**
 Permit No. **162**
 Basin **162**

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

NOTICE OF INTENT NO. 17634

1. OWNER **McGHEE, ERIC** ADDRESS AT WELL LOCATION **3331 E PAIUTE**
 MAILING ADDRESS **3331 E PAIUTE**
PAHRUMP, NV 89048

2. LOCATION **SE** 1/4 **NW** 1/4 Sec. **19** T **21S** N/S R **54E** E **NYE** County
 PERMIT NO. **45-263-06** **GREEN SADDLE RANCH** Subdivision Name
 Issued by Water Resources Parcel No.

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 RV
 Air Other

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thickness |
|-----------------|--------------|------|-----|-----------|
| CLAY & CALICHIE | | 0 | 70 | 70 |
| CALICHIE | WB | 70 | 82 | 12 |
| CLAY | | 82 | 101 | 19 |
| CALICHIE | WB | 101 | 114 | 13 |
| CLAY | | 114 | 124 | 10 |
| CALICHIE | WB | 124 | 137 | 13 |
| CLAY | | 137 | 140 | 3 |

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

HOLE DIAMETER (BIT SIZE)

| Inches | From | To | Feet |
|--------------|----------|------------|------|
| 10.25 | 0 | 140 | |

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|------------|
| 6.625 | 4.33 | .316 | 0 | 140 |

Perforations:
 Type perforation **SAW CUT**
 Size perforation **1/8 X 3**

| From | To | Feet |
|------------|------------|------|
| 100 | 140 | |

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 **140**

9. WATER LEVEL
 Static water level: **62** feet below land surf
 Artesian flow _____ G.P.M. _____ P
 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.** Contractor
 Address **PO BOX 4220** 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 Dan*
 By driller performing actual drilling on-site or contractor
 Date **5/22/98**

Date started **5/6/98**, 19
 Date completed **5/8/98**, 19

7. WELL TEST DATA

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

