

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. **18722**

1. OWNER **HECKSCHER, ED** ADDRESS AT WELL LOCATION **4561 PAIUTE**
 MAILING ADDRESS **4561 PAIUTE**
PAHRUMP, NV 89048

2. LOCATION **SW** 1/4 **NE** 1/4 Sec. **20 T 21S** N/S R **54E** E **NYE** County
 PERMIT NO. **45-291-14** **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 RVC
 Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
CLAY & CALICHIE		0	85	
CALICHIE	WB	85	97	12
CLAY		97	111	14
CALICHIE	WB	111	127	16
CLAY		127	135	8
CALICHIE	WB	135	140	5

8. WELL CONSTRUCTION

Depth Drilled **140** Feet Depth Cased **140** Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet
12.25	0	140	

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8.625	16.94	.188	0	140

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

From **100** feet to **120** feet
 From _____ feet to _____ feet

Surface Seal: Yes No
 Depth of Seal **50**

Placement Method: Pumped Poured
 Seal Type: Neat Cement Cement Grout Concrete Grout

Gravel Packed: Yes No
 From **50** feet to **140** feet

9. WATER LEVEL

Static water level **68** 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 **1642**

Signed *Thomas Dun*
 By driller performing actual drilling on-site or contractor
 Date **5/13/99**

Date started **5/3/99**, 19____
 Date completed **5/7/99**, 19____

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

