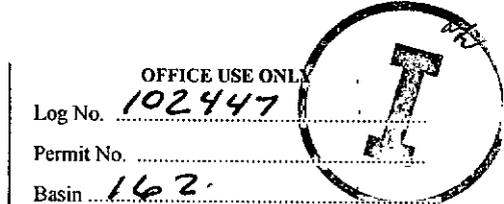


COPIES TO
 - DIVISION OF WATER RESOURCES
 - CLIENT'S COPY
 - WELL DRILLER'S COPY

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



OFFICE USE ONLY
 Log No. 102447
 Permit No. _____
 Basin 162

PRINT OR TYPE ONLY

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

NOTICE OF INTENT NO. 30554
 ADDRESS AT WELL LOCATION 1641 W. Amarillo Ave.

1. OWNER Billy Kuhn & Sons
 MAILING ADDRESS _____

ADDRESS AT WELL LOCATION 1641 W. Amarillo Ave.

2. LOCATION NE 1/4 SW 1/4 Sec. 29 T. 29S N R. 53 E

PERMIT NO. 40-253-03 Parcel No. 209 Subdivision Name Calvada Valley Ut: 5, Blk: 5, Lot: 3

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 |
|--------------------------|--------------|------|-----|-----------|
| Surface | | 0 | 4 | 4 |
| Brown Clay/Gran. Caliche | | 4 | 14 | 10 |
| Brown Clay/Caliche | | 14 | 17 | 3 |
| Limestone | | 17 | 22 | 5 |
| Brown Clay/Caliche | | 22 | 99 | 77 |
| Brown Clay | X | 99 | 200 | 101 |

8. WELL CONSTRUCTION
 Depth Drilled 200 Feet Depth Cased 200 Feet

HOLE DIAMETER (BIT SIZE)
 From 10 Inches To 0 Feet 200 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

9. CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|-----------|
| 6 5/8 | 3.92 | .28 | 0 | 200 |

Perforations:
 Type perforation Saw Cut
 Size perforation 1/4" width 8" long
 From 160 feet to 200 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 50 feet to 200 feet

9. WATER LEVEL
 Static water level 67 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 JIM PIKE WELL DRILLING, LLC.
 (CONTRACTOR)

Address P.O. BOX 56
 (CONTRACTOR)
PAHRUMP, NV. 89041
 Nevada contractor's license number issued by the State Contractor's Board 17563A
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1324
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date February 28, 2007

Date started February 23, 20 07
 Date completed February 23, 20 07

7. WELL TEST DATE

| TEST METHOD: | G.P.M. | Draw Down (Feet Below Static) | Time (Hours) |
|--|-----------|-------------------------------|--------------|
| <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift | <u>20</u> | <u>4</u> | <u>1/4</u> |

DCNR/DWR
 RECEIVED
 MAR 01 2007

LAS VEGAS OFFICE