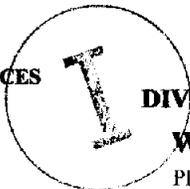


COPIES TO
 - DIVISION OF WATER RESOURCES
 - CLIENT'S COPY
 - WELL DRILLER'S COPY



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

OFFICE USE ONLY
 Log No. 103163
 Permit No. _____
 Basin 105

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. 5823
58247
CARSON CITY, NV 89701

1. OWNER **LENNAR CORPORATION**
 MAILING ADDRESS **P.O. BOX 12010-LC**
HEMET, CA 92546

ADDRESS AT WELL LOCATION **6701 CENTER ST**
CARSON CITY, NV 89701

2. LOCATION NE 1/4 SW 1/4 Sec 5 T 14 N R 20 E **CARSON** County
 PERMIT NO. NW SE **9-311-09**
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 N/A

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
OLD 8 5/8 #1 Well		2	105	105
PERFORATED FROM 42' TO 90' 6 ROWS 2' APART				
TRIMMED WITH PIPE TO 105' PUMPED FULL WITH 2.5 YRDS NEAT CEMENT				
<u>N39.106861</u> <u>W119.759172 NAD 83</u>				
GPS INFO: NAD 83 <u>39.10676°N</u> <u>119.75917°W</u>				

8. WELL CONSTRUCTION

Depth Drilled N/A Feet Depth Cased N/A Feet
 HOLE DIAMETER (BIT SIZE)
 From _____ To _____
N/A Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8 5/8	14.86	.188	+2	105

Perforations:
 Type perforation N/A
 Size perforation _____
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal N/A Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From _____ feet to _____ feet N/A feet

9. WATER LEVEL
 Static water level _____ 25 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature N/A °F Quality N/A

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name **CAPITAL CITY WELL DRILLING**
(CONTRACTOR)

Address **20 KIT KAT DRIVE**
(CONTRACTOR)
CARSON CITY, NV 89706

Nevada contractor's license number issued by the State Contractor's Board **0055548**

Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1905**

Signed Michael H. Beck
 By driller performing actual drilling on site or contractor
 Date **3/28/07**

7. WELL TEST DATE

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
<u>2007 APR 11 AM 10:57</u>		
<u>RECEIVED</u>		