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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. 59144

1. OWNER Model T. Casino ADDRESS AT WELL LOCATION Model T Casino
 MAILING ADDRESS 1130 W. Winnemucca Blvd. 1130 W. Winnemucca Blvd.
 2. LOCATION SE 1/4 30 T. 36 N. 38 E Humboldt County
 PERMIT NO. Fact# 5-000114 015-282-09 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 HSA

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thick-ness |
|----------------------|--------------|------|---------|------------|
| Asphalt | | 0 | 4" | 4" |
| Road base | | 4" | 1' | 8" |
| Sand | | 1' | 5' | 4' |
| Silty sandy clay | | 5' | 10' | 5' |
| Sand coarse | 18' | 10' | 35 1/2' | 25 1/2' |
| NAD 83 | | | | |
| Easting 2856415.00 | | | | |
| Northing 15387252.77 | | | | |
| N40.964524 | | | | |
| W. 117.743196 N002 | | | | |
| Asp-5 | | | | |

8. WELL CONSTRUCTION
 Depth Drilled 35 1/2 Feet Depth Cased 35 1/2 Feet
 HOLE DIAMETER (BIT SIZE)
 From 8 1/2 Inches To 35 1/2 Feet
 From 0 Feet To 35 1/2 Feet
 From 0 Feet To 35 1/2 Feet
 From 0 Feet To 35 1/2 Feet
 CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|---------------|
| <u>3/4"</u> | | <u>Sch. 40</u> | <u>0</u> | <u>33 1/2</u> |

 Perforations:
 Type perforation Factory slot
 Size perforation 1020
 From 33 1/2 feet to 35 1/2 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 27' Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No Bentonite From 32 1/2 to 27 1/2
 From 35 1/2 feet to 32 1/2 feet

9. WATER LEVEL
 Static water level 18' feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 68.5 °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 Haz-Tech Drilling Inc Contractor
 Address P.O. Box 940 Contractor
Meridian ID 83642
 Nevada contractor's license number 0038018 issued by the State Contractor's Board
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-2188
 Signed Mike C
 By driller performing actual drilling on site or contractor
 Date 5-15-08

Date started 5-15, 2008
 Date completed 5-15, 2008

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 | | | |
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