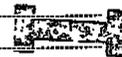


Log No. **41419**

Permit No. _____

Basin **212**



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. **10572**

1. OWNER **USA Petroleum Corp** ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS **2701 Ocean Park Ave #210** **3395 E. Tropicana Ave**
Santa Monica, CA, 90406

2. LOCATION **NE 1/4 NE 1/4 Sec 25 T 21 N/S R 61 E Clark** County
 PERMIT NO. **MO-2249** 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 _____

6. LITHOLOGIC LOG **MW-3**

Material	Water Strata	From	To	Thickness
Fill - Concrete over sandy gravel, brn	N	0	3	3
SILTY SAND - brn	N	3	8	5
SANDY CLAY - w/ cal gr and gypsum, brn/lt grey	N	8	23	15
SILTY CLAY - w/ cal gr, blk	N	23	33	10
SILTY CLAY - lt brn	Y	33	50	17

8. WELL CONSTRUCTION
 Depth Drilled **50** Feet Depth Cased **48** Feet

HOLE DIAMETER (BIT SIZE)
 From **8 1/4** Inches To **50** Feet
 _____ Inches _____ Feet
 _____ Inches _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4	sch 40		0	48

Perforations:
 Type perforation **slotted screen**
 Size perforation **0.010-inch slot**

From **48** feet to **33** 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
 From **50** feet to **27** feet

RECEIVED

MAY 12 1993

Div. of Water Resources
 Branch Office - Las Vegas, NV

Date started **4/29** 19**93**
 Date completed **4/29** 19**93**

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

9. WATER LEVEL
 Static water level **34.75** 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 **Tim Ken, Western Technologies Inc** Contractor
 Address **3611 W. Tompkins Ave** Contractor
Las Vegas, NV. 89103

Nevada contractor's license number issued by the State Contractor's Board _____
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1869-M**

Signed **Tim Ken**
 By driller performing actual drilling on site or contractor
 Date **5/6/93**