

OFFICE USE ONLY
 Log No. 4137
 Permit No. 83
 Basin.....
 NOTICE OF INTENT NO. 23020

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

1. OWNER David & Shannon Montana ADDRESS AT WELL LOCATION 2320 Enterprise
 MAILING ADDRESS P. O. Box 407 Virginia City, Nv 89440 Lot 68 Block I
 2. LOCATION SW 1/4 NE 1/4 Sec 32 T 18 N/S R 21 E Storey County
 PERMIT NO. 3-062-12 - Virginia City Highlands 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

| Material | Water Strata | From | To | Thick-ness |
|--|--------------|------|-----|------------|
| Over burden | | 0 | 1 | 1 |
| Volcanic rock & clay | | 1 | 50 | 49 |
| Purple & green volcanic rock | | 50 | 95 | 45 |
| Purple & green rock little reddish clay | | 95 | 120 | 25 |
| Gray & green rock & red rock | | 120 | 158 | 38 |
| Gray rock & clay | | 158 | 178 | 20 |
| Gray rock & clay little green rock & white specs | | 178 | 237 | 59 |
| T.D. 237 ft | | | | |

8. WELL CONSTRUCTION
 Depth Drilled 237 Feet Depth Cased 237 Feet
 HOLE DIAMETER (BIT SIZE)
 10 5/8 Inches 0 Feet 50 Feet
 8 1/2 Inches 50 Feet 237 Feet

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|-----------|
| 6 5/8 | 12.92 | .188 | + 1 | 237 |

Perforations:
 Type perforation factory
 Size perforation 3/32 X 3
 From 217 feet to 237 feet
 From.....feet to.....feet
 From.....feet to.....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 237 feet

9. WATER LEVEL
 Static water level 100 feet below land surface
 Artesian flow.....G.P.M. P.S.I.
 Water temperature.....°F Quality.....

Date started 5/3/93, 19.....
 Date completed 5/4/93, 19.....

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 checked="" type="checkbox"/> Air Lift | <u>2-3</u> | | <u>2 1/2</u> |

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name AQUA DRILLING & WELL SERVICE, INC Contractor
 Address 625 SPICE ISLANDS DR SUITE L
SPARKS, NV 89431 Contractor
 Nevada contractor's license number 15291 issued by the State Contractor's Board.
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1804
 Signed Roger M. Thrall By driller performing actual drilling on site or contractor
 Date 5/10/93