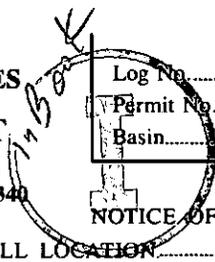


WELL DRILLER'S REPORT

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



Log No. 41921
 Permit No. _____
 Basin _____

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

1. OWNER Paul Lunsford ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS _____

2. LOCATION NE 1/4 NE 1/4 Sec. 17 T. 20-S N/S R. 53 E Nye County _____
 PERMIT NO. _____ 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

Material	Water Strata	From	To	Thickness
Surface		0	4	4
Grey Clay		4	32	28
Brown Clay		32	46	14
Grey Clay	x	46	88	42
Redish Silty Clay		88	134	46
Grey Clay	x	134	157	23
Brown Clay	x	157	200	43

8. WELL CONSTRUCTION

Depth Drilled 200 Feet Depth Cased 200 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet
<u>12</u>	<u>0</u>	<u>200</u>	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
	<u>18 lbs.</u>	<u>.188</u>	<u>0</u>	<u>200</u>

Perforations:
 Type perforation Torch Cut
 Size perforation 1/4 in width 8 in 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 44 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 Charles Nyberg Contractor
 Address St. Rt. Box 36525 Contractor
 Nevada contractor's license number 7484 issued by the State Contractor's Board
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 725
 Signed Charles Nyberg
 By driller performing actual drilling on site or contractor
 Date October 26, 1992

RECEIVED
 NOV 02 1992
 Div. of Water Resources
 Branch Office - Las Vegas, NV

Date started October 7 1992
 Date completed October 9 1992

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	<u>20</u>	<u>4</u>	<u>1/4</u>