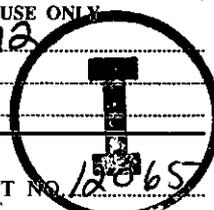


Log No. 43672

Permit No. 236

Basin 236



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. 12065

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

1. OWNER Bill Dewitt ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS P.O. Box 10
Amargosa, NV, 89020
 2. LOCATION NE 1/4 SE 1/4 Sec. 14 T. 16S N/S R. 48 E. Nye. County
 PERMIT NO. 19-031-12 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
Sand + Gravel		0	35	35
Clay Sand + Gravel		35	57	22
Black Volcanic Rock		57	63	6
Sandy clay		63	108	45
Fine Gravel	WB	108	116	8
Big. Gravel + Silt		116	160	44
Gravel	WB	160	180	20
Small Gravel + Sand		180	205	25
Gravel	WB	205	260	55

8. WELL CONSTRUCTION
 Depth Drilled _____ Feet Depth Cased _____ Feet
 HOLE DIAMETER (BIT SIZE)
 From _____ To _____
12 1/4 Inches 0 Feet 60 Feet
9 7/8 Inches 60 Feet 260 Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8 7/8</u>	<u>16.97</u>	<u>1.88</u>		

Perforations:
 Type perforation Air Perforator
 Size perforation 4 1/2" X 2"
 From 160 feet to 180 feet
 From 205 feet to 260 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 _____ feet to _____ feet

RECEIVED

FEB 08 1994

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

9. WATER LEVEL
 Static water level 95 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 11-10 1993
 Date completed 11-14 1993

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			

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Great Basin Drilling Contractor
 Address HCB 78 Box 80358 Contractor
Pahrump NV. 89041
 Nevada contractor's license number 30880
 issued by the State Contractor's Board.
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1770
 Signed Steve S. [Signature]
 By driller performing actual drilling on site or contractor
 Date 12-1-93

