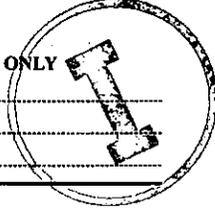


OFFICE USE ONLY
Log No. 44616
Permit No. _____
Basin 162



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 12899

1. OWNER MIKE RUGGERO ADDRESS AT WELL LOCATION
MAILING ADDRESS _____ LOT 2 EFFINGER ST
_____ PAHRUMP NV 89041

2. LOCATION NW 1/4 SW 1/4 Sec 36 T. 19S N/S R 52 E NYE County
PERMIT NO. 27-171-25 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	Thick-ness
CLAY		0	7	7
CALICHIE		7	15	8
CLAY		15	26	11
CALICHIE		26	32	6
CLAY		32	38	6
CALICHIE		38	46	8
CLAY		46	53	7
CALICHIE	WB	53	61	8
CLAY		61	69	8
CALICHIE	WB	69	73	4
CLAY		73	86	13
CALICHIE	WB	86	94	8
CLAY		94	112	18
CALICHIE	WB	112	114	2
CLAY		114	127	13
CALICHIE	WB	127	130	3
CLAY		130	134	4
CALICHIE	WB	134	140	6
		140		140

8. WELL CONSTRUCTION
Depth Drilled 140 Feet Depth Cased 140 Feet

HOLE DIAMETER (BIT SIZE)
From To
1 1/4 Inches 0 Feet 140 Feet
Inches Feet Feet
Inches Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8 5/8</u>	<u>16.9</u>	<u>.188</u>	<u>0</u>	<u>140</u>

Perforations:
Type perforation FACTORY SAW CUT
Size perforation 1 1/8 X 3"
From 100 feet to 120 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 140 feet

RECEIVED
JUN 29 1994

9. WATER LEVEL
Static water level 49 feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

Div. of Water Resources
Branch Office - Las Vegas, NV
Date started 5-16-94, 19_____
Date completed 5-30-94, 19_____

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 CO., INC. Contractor
Address HCR 78 BOX 80359 Contractor
PAHRUMP NV 89041
Nevada contractor's license number issued by the State Contractor's Board 30880
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1642
Signed Thomas Dan
By driller performing actual drilling on site or contractor
Date 6-10-94

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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