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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. 13714

1. OWNER Serenity Homes ADDRESS AT WELL LOCATION 2391 E
 MAILING ADDRESS _____
 2. LOCATION SE 1/4 SW 1/4 Sec 36 T 20S N/S R 53 E Nye County
 PERMIT NO. 41-211-25 Parcel No. Calvada Valley 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 |
|----------|--------------|------|-----|-----------|
| Clay | | 0 | 8 | 8 |
| Caliche | | 8 | 12 | 4 |
| Clay | | 12 | 42 | 30 |
| Caliche | | 42 | 44 | 2 |
| Clay | | 44 | 64 | 20 |
| Caliche | WB | 64 | 67 | 3 |
| Clay | | 67 | 88 | 21 |
| Caliche | WB | 88 | 93 | 5 |
| Clay | | 93 | 119 | 26 |
| Caliche | WB | 119 | 124 | 5 |
| Clay | | 124 | 136 | 12 |
| Caliche | WB | 136 | 140 | 4 |

8. WELL CONSTRUCTION
 Depth Drilled 140 Feet Depth Cased 140 Feet
 HOLE DIAMETER (BIT SIZE)
 From 12 1/4 Inches To 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>16.44</u> | <u>.188</u> | <u>0</u> | <u>140</u> |

Perforations:
 Type perforation Factory Saw cut
 Size perforation 1/8 x 3
 From 100 feet to 120 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

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AUG 25 1994

Div. of Water Resources
 Branch Office Las Vegas, NV

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal 50
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 50 feet to 140 feet

Date started 7-29, 1994
 Date completed 7-30, 1994

7. WELL TEST DATA

| TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift | | | |
|--|-------------------------------|--------------|--|
| G.P.M. | Draw Down (Feet Below Static) | Time (Hours) | |
| | | | |
| | | | |
| | | | |
| | | | |

9. WATER LEVEL
 Static water level 53 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 Great Basin Drilling
 Address Her 78 Box 80358
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 Dun
 By driller performing actual drilling on site or contractor
 Date 8-3-94