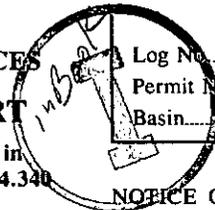


PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

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



Log No. 47856
 Permit No. _____
 Basin _____
 NOTICE OF INTENT NO. 14630

1. OWNER Cislagni ADDRESS AT WELL LOCATION 5914 Saddletree
 MAILING ADDRESS _____

2. LOCATION NE $\frac{1}{4}$ NE $\frac{1}{4}$ Sec. 16 T. 21S N/S R. S4 E Nye County
 PERMIT NO. 43-062-16 Parcel No. Cottonwoods 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
Cobbles-Dirt		0	8	8
Gravel-Clay		8	42	34
Cemented Gravel		42	76	34
Caliche-Trace		76	82	6
Clay		82	93	11
Caliche	WB	93	96	3
Clay		96	105	9
Caliche	WB	105	114	9
Clay		114	122	8
Caliche	WB	122	127	5
Clay		127	140	13
Caliche	WB	140	143	3
Clay		143	152	9
Caliche	WB	152	156	4
Clay		156	169	13
Caliche	WB	169	172	3
Clay		172	175	3

8. WELL CONSTRUCTION
 Depth Drilled 175 Feet Depth Cased 175 Feet

HOLE DIAMETER (BIT SIZE)
 From 12 1/4 Inches To 0 Feet 175 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>16.94</u>	<u>.188</u>	<u>0</u>	<u>175</u>

Perforations:
 Type perforation Factory Saw Cut
 Size perforation 8" x 3"

From _____ feet to _____ feet
 From 135 feet to 155 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 175 feet

9. WATER LEVEL
 Static water level: 85 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started April 25, 1988
 Date completed May 1, 1988

7. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

G.P.M.	Draw-Down (Feet Below Static)	Time (Hours)
	RECEIVED	
	JUN 13 1995	
	Div. of Water Resources Branch Office - Las Vegas, NV	

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 HCR 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 1642
 Division of Water Resources, the on-site driller.

Signed Thomas Dan
 By driller performing actual drilling on site or contractor
 Date 5/20/95

