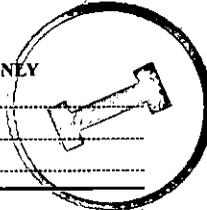


Log No. 47961
 Permit No. _____
 Basin 163



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. 16454

1. OWNER CLAY BLINCOE ADDRESS AT WELL LOCATION TETON + COPPER SANDY VALLEY NV.
 MAILING ADDRESS _____
 2. LOCATION 1/4 SW 1/4 SE 1/4 Sec 15 T 24 S N/S R 56 E CLARK County
 PERMIT NO. 580-100-035 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 |
|------------------------|--------------|------|-----|------------|
| SANDY LOAM | | 0 | 4 | 4 |
| CLAY + ROCK | | 4 | 18 | 14 |
| CEMENTED SAND + GRAVEL | | 18 | 122 | 104 |
| SAND + GRAVEL | W.B. | 122 | 128 | 6 |
| CLAY | | 128 | 140 | 12 |
| CALICHE | | 140 | 150 | 10 |
| SAND + GRAVEL | W.B. | 150 | 180 | 30 |

8. WELL CONSTRUCTION
 Depth Drilled 180 Feet Depth Cased 180 Feet
 HOLE DIAMETER (BIT SIZE)
 From 12 1/4 Inches To 0 Feet 180 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>180</u> |

Perforations:
 Type perforation FACTORY SAW CUT
 Size perforation 8 INCH BY 3 INCH
 From 180 feet to 160 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 180 feet to 50 feet

9. WATER LEVEL
 Static water level 110 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature COOL °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 BUDGET Drilling Co. Contractor
 Address P.O. BOX 3505 Contractor
PA HUMP NV. 89041
 Nevada contractor's license number issued by the State Contractor's Board 40020
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1573
 Signed Wanda Brown
 By driller performing actual drilling on site or contractor
 Date 7-14-95

Date started 7-10, 1995
 Date completed 7-14, 1995

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

