



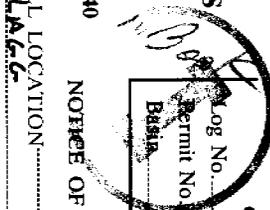
WELL DRILLER'S REPORT

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

NOTICE OF INTENT NO. 17004

1. OWNER Fahrman Dairy

ADDRESS AT WELL LOCATION
INCEN & BLAKE



2. LOCATION NE 1/4 NE 1/4 Sec 9 T 20S

N/S R 53 E NYE County

PERMIT NO. MO-2589 35-11-11

Subdivision Name

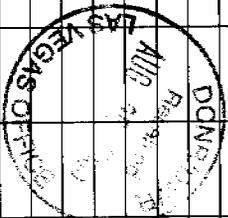
3. WORK PERFORMED
 New Well
 Replace
 Abandon
 Recordion
 Other

4. Domestic
 Municipal/Industrial
 Irrigation
 Test
 Monitor
 Stock

5. WELL TYPE
 Cable
 Rotary
 RVC
 Air
 Other

LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Clay		0	2	2
caliche		2	4	2
Clay		4	7	3
caliche		7	9	2
Clay		9	16	7
caliche		16	19	3
Clay		19	23	4
caliche		23	25	2
Clay		25	35	10
caliche		35	37	2
Clay		37	44	7
caliche		44	47	3
Clay		47	51	4
caliche		51	57	6
Clay		57	62	5



8. WELL CONSTRUCTION
 Depth Drilled 62 Feet
 HOLE DIAMETER (BIT SIZE)
 From 9 7/8 Inches To 6 1/2 Feet
 From 0 Inches To 6 1/2 Feet
 From 0 Inches To 6 1/2 Feet

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>9 7/8</u>				
<u>6 1/2</u>				

Perforations: Slotted
 Type perforation 1 1/2 x 2
 Size perforation 3/2
 From 32 feet to 57 feet
 From 0 feet to 0 feet
 From 0 feet to 0 feet
 From 0 feet to 0 feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Placement Method: Pumped Poured

Gravel Packed: Yes No
 From 30 feet to 62 feet

9. WATER LEVEL
 Static water level: 55 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
 Contractor
 Address: HERTZ Box 80358
Fahrman 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 1642



Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date: 8-22-05

Date started 8-16 19 95
 Date completed 8-19 19 95

7. WELL TEST DATA
 TEST METHOD: Bailor Pump Air Lift
 Draw Down (Feet Below Static) Time (Hours)

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