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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 INCIDENT NO. 28133

1. OWNER Western Energetix Corp. ADDRESS AT WELL LOCATION ONE 1/2 MILE EAST OF FERNLEY, NV.
 MAILING ADDRESS SAME

2. LOCATION NE 1/4 SW 1/4 Sec 7 T. 20 N S R 25 E Churchill County
 PERMIT NO. MO 912 Issued by Water Resources Parcel No. _____ Subdivision Name _____

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other _____
 4. PROPOSED USE SVW
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock
 5. WELL TYPE
 Cable Rotary RVC
 Air Other HSA

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>BREAK END OF PIPE</u>				
<u>FILL PIPE W/ cement</u>				
<u>PULL 20' OF PVC +</u>				
<u>LAST 5' OF PVC BROKE</u>				
<u>FILL TO GS W/ CONCRETE</u>				

8. WELL CONSTRUCTION
 Depth Drilled 31.5 Feet Depth Cased 25 Feet
 HOLE DIAMETER (BIT SIZE)
 From _____ To _____
 Inches _____ Feet _____ Feet
 Inches _____ Feet _____ Feet
 Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4"</u>		<u>SCH 40</u>	<u>0</u>	<u>5</u>

Perforations:
 Type perforation SLOT 020
 Size perforation _____
 From _____ feet to _____ feet
 From 5 feet to _____ feet
 From _____ feet to 25 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 25 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level WELL ABOVE H₂O 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 NEVADA DRILLING INC. Contractor
 Address 75 LEWERS CREEK RD
CARSON CITY NV 89704 Contractor
 Nevada contractor's license number 13697A
 issued by the State Contractor's Board
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller. 1902
 Signed John S. Clark
 By driller performing actual drilling on site or contractor
 Date 10-13-95

Date started 9-6 1995
 Date completed 9-6 1995

7. WELL TEST DATA

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

RECEIVED
 43 OMM 7 10055
 STATE ENGINEERS OFFICE

SVW-2

