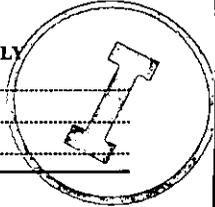


Log No. **50700**
 Permit No. _____
 Basin **162**



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. **16895**

1. OWNER **Charles Forbrite** ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS **360 W. Gally** **Galley/Pahrump**
Pahrump, NV 89041

2. LOCATION **SW 1/4 NE 1/4 Sec. 28 T. 19S N/S R. 53 E. Nye** County _____
 PERMIT NO. **29-892-11** **Bell Vista Estates**
 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 Soil		0	15	15
Dec Colaichia		15	32	17
Hard Calichia		32	41	9
Grey Clay	x	41	55	14
Brown Clay	x	55	62	7
Calichia	x	62	67	5
Grey Clay	x	67	85	18
Brown Clay	x	85	98	13
Calichia	x	98	102	4
Grey Clay	x	102	116	14
Brown Clay	x	116	122	6
Calichia	x	122	142	20
Grey Clay	x	142	152	10
Brown Clay	x	152	165	13
Grey Clay	x	165	174	9
Brown Clay	x	174	180	6

8. WELL CONSTRUCTION
 Depth Drilled **180** Feet Depth Cased **180** Feet

HOLE DIAMETER (BIT SIZE)
 From **0** Feet To **180** Feet
12 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)
8	17	188	0	180

Perforations:
 Type perforation **Torch**
 Size perforation **1/4 x 6**
 From **140** 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 **130** feet to **180** feet

9. WATER LEVEL
 Static water level **52** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **Cold** °F Quality **Good**

Date started **January 5**, 19**96**
 Date completed **January 6**, 19**96**

7. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
30	na	1/2

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name **Larry Jenkins** Contractor
 Address **P.O. Box 3392** Contractor
Pahrump, NV 89041
 Nevada contractor's license number issued by the State Contractor's Board **0035901**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1916**
 Signed **Larry Jenkins**
 By driller performing actual drilling on site or contractor
 Date **1-10-96**

