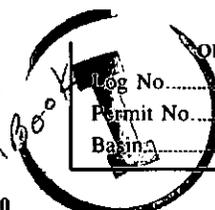


PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

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. 15069

1. OWNER Chuck Price ADDRESS AT WELL LOCATION Gamebird
 MAILING ADDRESS _____
 2. LOCATION NW 1/4 NE 1/4 Sec. 1 T. 21S N/S R. 53 E Nye County
 PERMIT NO. 44-051-04 Parcel No. Richardson Subdivision Name ROS
 Issued by Water Resources _____

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	Thickness
clay		0	4	4
caliche		4	7	3
clay		7	51	44
caliche	WB	51	58	7
clay		58	76	18
caliche	WB	76	78	2
clay		78	92	14
caliche	WB	92	95	3
clay		95	124	29
caliche	WB	124	127	3
clay		127	153	26
caliche	WB	153	156	3
clay		156	188	32
caliche	WB	188	192	4
clay		192	205	13
caliche	WB	205	208	3
clay		208	216	8
caliche	WB	216	219	3
clay		219	225	6

8. WELL CONSTRUCTION
 Depth Drilled 225 Feet Depth Cased 225 Feet
 HOLE DIAMETER (BIT SIZE)
 From 12 1/4 Inches To 0 Feet 225 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 3/8</u>	<u>16.94</u>	<u>.188</u>	<u>0</u>	<u>225</u>

Perforations:
 Type perforation Factory saw cut 2 tooth perf
 Size perforation 1/4 x 3
 From 60 feet to 225 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 225 feet

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

Date started 3-21 1996
 Date completed 3-22 1996

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			

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 PO Box 4220 Contractor 89041
Pahrump NV
 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 Thomas Dean
 By driller performing actual drilling on site or contractor
 Date 3-27-96