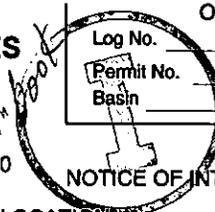


WELL DRILLER'S REPORT

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



PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

1. OWNER **SCOTT, SHERI**

MAILING ADDRESS
PAHRUMP, NV 89041

ADDRESS AT WELL LOCATION
4230 GERALD

2. LOCATION **SE 1/4 SE 1/4 Sec. 23 T 20S**
 PERMIT NO. **28-821-06**

N/S R 52E E NYE County
CHARLESTON PARK RANCHOS

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	Thickness
CLAY		0	28	28
CALICHIE		28	32	4
CLAY		32	67	35
CALICHIE	WB	67	70	3
CLAY		70	98	28
CALICHIE	WB	98	105	7
CLAY		105	126	21
CALICHIE	WB	126	129	3
CLAY		129	135	6
CALICHIE	WB	135	140	5

8. WELL CONSTRUCTION

Depth Drilled **140** Feet Depth Cased **140** Feet

HOLE DIAMETER (BIT SIZE)

12.25 Inches From **0** Feet To **140** Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8.625	16.94	.188	0	140

Perforations:

Type perforation **FACTORY SAW CUT**
 Size perforation **1/8 X 3**

From **100** feet to **120** feet
 From _____ feet to _____ feet

Surface Seal: Yes No

Depth of Seal **50**

Placement Method: Pumped
 Poured

Seal Type:

- Neat Cement
 Cement Grout
 Concrete Grout

Gravel Packed: Yes No

From **50** feet to **140** feet

9. WATER LEVEL

Static water level **46** 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 Co.**

Contractor

Address **P O BOX 4220**

Contractor

PAHRUMP, NV 89041

Nevada contractor's license number issued by the State Contractor's Board **30880**

Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1642**

Signed *Thomas De...*
 By driller performing actual drilling on-site or contractor

Date **6-6-96**

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

