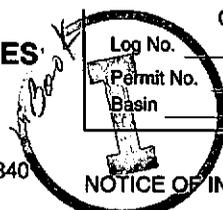


WELL DRILLER'S REPORT

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 **MARTIN, FLORENCE** ADDRESS AT WELL LOCATION **5670 BONNIE ST**  
 MAILING ADDRESS **PAHRUMP, NV 89041**

2. LOCATION **NE 1/4 SE 1/4 Sec. 11 T 21S N/S R 53E E NYE** County  
 PERMIT NO. **44-322-02** JOYCELYN 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
CLAY		0	28	28
CALICHIE		28	31	3
CLAY		31	68	37
CALICHIE	WB	68	72	4
CLAY		72	97	25
CALICHIE	WB	97	102	5
CLAY		102	127	25
CALICHIE	WB	127	129	2
CLAY		129	138	9
CALICHIE	WB	138	140	2

8. WELL CONSTRUCTION  
 Depth Drilled **140** Feet Depth Cased **140** Feet

HOLE DIAMETER (BIT-SIZE)  
 From **12.25** Inches To **0** Feet **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  
 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 **140** feet

9. WATER LEVEL  
 Static water level **56** feet below land surfac  
 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

Date started **5/27/96**, 19\_\_\_\_  
 Date completed **5/30/96**, 19\_\_\_\_

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

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

Address **P O BOX 4220** Contractor  
**PAHRUMP, NV 89041** Contractor

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 D...*  
 By driller performing actual drilling on-site or contractor  
 Date **6/5/96**

