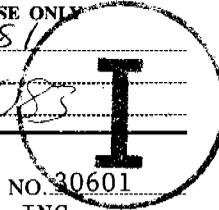


OFFICE USE ONLY
 Log No. 52081
 Permit No. _____
 Basin 083



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. 30601

1. Consultant: KENNEDY/JENKS, INC. ADDRESS AT WELL LOCATION: REFUSE, INC.
 OWNER: _____ MAILING ADDRESS: 5190 Niel Road, Suite 300 Lockwood Landfill
Reno, Nevada 89502 Lockwood, Nevada
 2. LOCATION CCCA 1/4 Sec. 23 T. 19N N/S R. 21 E. Storey County
 PERMIT NO. M/O-253/R-280/MW-LI-5 04-131-03 SE of Landfill area
 Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED 4. PROPOSED USE 5. WELL TYPE

New Well Replace Recondition Domestic Irrigation Test Cable Rotary RVC
 Deepen Abandon Other _____ Municipal/Industrial Monitor Stock Air Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
MONITOR WELL ABANDONMENT:				
Static water level: <u>Not known</u>				
Total Depth: <u>453 ft.</u>				
Equipment used:				
<u>Service Truck & 3 man crew</u>				
<u>Gorman Rupp Cement Pump w/electric mixer</u>				
<u>445 ft. x 1 1/2" dia. Tremie Pipe</u>				
<u>Generator</u>				
Materials used:				
<u>61 Sacks of Portland Cement Type II</u>				
1.) <u>Measure static water level & total depth</u>				
2.) <u>Set Tremie Pipe to bottom of casing</u>				
3.) <u>Pump neat cement from bottom to surface</u>				

8. WELL CONSTRUCTION

Depth Drilled _____ Feet Depth Cased _____ 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)

Perforations:

Type perforation _____
 Size perforation _____

From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Depth of Seal _____
 Placement Method: Pumped Poured

Gravel Packed: Yes No
 From _____ feet to _____ feet

Date started April 25, 1996
 Date completed April 25, 1996

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

9. WATER LEVEL

Static water level _____ 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 WAYNE DRILLING, INC. Contractor
 Address P.O. BOX 12370 Contractor
RENO, NEVADA 89510
 Nevada contractor's license number 0022549
 issued by the State Contractor's Board
 Nevada driller's license number 908 issued by the Division of Water Resources, the on-site driller:
 Signed [Signature] By driller performing actual drilling on site or contractor
 Date April 30, 1996