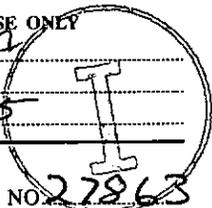


OFFICE USE ONLY
 Log No. 62472
 Permit No. _____
 Basin. 105



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. 27863

1. OWNER Hugh Stockton ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS PO Box 159 2832 2842 E SAW
MINDEN NV 89423 MINDEN NV

2. LOCATION NE 1/4 SW 1/4 Sec. 26 T. 14 N/S R. 20 E Douglas County
 PERMIT NO. 21-240-52 Johnson In Subdivision Name
Issued by Water Resources Parcel No.

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
top soil SAND		0	10	
clay		10	90	
Clay & Sand		90	110	
Clay Sand & Gravel		110	175	
Clay Sand & Gravel	X	175	200	
Clay		200	210	
Clay & Sand	X	210	245	
Clays		245	260	

8. WELL CONSTRUCTION
 Depth Drilled 260 Feet Depth Cased 260 Feet

HOLE DIAMETER (BIT SIZE)
 From To
9 7/8 Inches 0 Feet 260 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>7</u>	<u>.188</u>	<u>0</u>	<u>260</u>

Perforations:
 Type perforation Factory cut
 Size perforation 3" x 5/32"

From _____ feet to _____ feet
 From 240 feet to 220 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 260 feet to 50 feet

Date started 10-4, 1996
 Date completed 10-11, 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 checked="" type="checkbox"/> Air Lift	<u>30</u>	<u>-</u>	<u>3 hrs.</u>

9. WATER LEVEL
 Static water level 171 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cold °F Quality good

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Kawchack Drilling Inc Contractor
 Address PO Box 1359 Contractor
Minden NV 89423
 Nevada contractor's license number 021268
 issued by the State Contractor's Board
 Nevada driller's license number issued by the 1495
 Division of Water Resources, the on-site driller
 Signed U Michael Allen
 By driller performing actual drilling on site or contractor
 Date 10-11-96

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 STATE ENGINEERS OFFICE