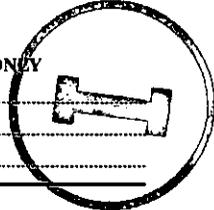


Log No. **64844**

Permit No.

Basin **162**



PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT *in Book*

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

NOTICE OF INTENT NO. **16276**

1. OWNER **RAY FEASTER** ADDRESS AT WELL LOCATION
 MAILING ADDRESS **781 WEST GARDEN LANE**

2. LOCATION **NE 1/4 NW 1/4 Sec. 28 T. 20S N/S R. 53 E. NYE** County
 PERMIT NO. **39-085-01** CALVADA VALLEY UNIT 8B BLOCK 12
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
Surface		0	4	4
Brown clay		4	8	4
Limestone		8	17	9
Gray clay		17	31	14
Gray clay & caliche	X	31	68	27
Brown clay		68	72	14
Brown clay & caliche		72	105	33
Brown clay		105	115	10
Brown clay & caliche	X	115	132	17
Brown clay		132	140	8

8. WELL CONSTRUCTION
 Depth Drilled **140** Feet Depth Cased **140** Feet
 HOLE DIAMETER (BIT SIZE)
 From To
12 Inches **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 5/8	16.94	.188	0	140

Perforations:
 Type perforation **Torch cut**
 Size perforation **1/4" width 8" long**
 From **100** feet to **140** 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: **40** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started **APRIL 24**, 19**97**
 Date completed **APRIL 24**, 19**97**

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
20	4	1/4

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name **JIM PIKE WELL DRILLING, LLC**
Contractor
 Address **P.O. BOX 56**
Contractor
PAHRUMP, NV 89041
 Nevada contractor's license number **17563A**
 issued by the State Contractor's Board.
 Nevada driller's license number issued by the **1812**
 Division of Water Resources, the on-site driller.
 Signed *[Signature]*
 By driller performing actual drilling on site or contractor
 Date **APRIL 28, 1997**