

STATE OF NEVADA
 DIVISION OF WATER RESOURCES
 WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. **69573**
 Permit No. **162**
 Basin

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

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

NOTICE OF INTENT NO. **16130**

1. OWNER **CLEVELAND, DAVE** ADDRESS AT WELL LOCATION **281 S WOODCHIPS**
 MAILING ADDRESS **281 S WOODCHIPS PAHRUMP, NV 89048**

2. LOCATION **SW** 1/4 **NE** 1/4 Sec. **18** T **20S** N/S R **53E** E **NYE** County
 PERMIT NO. **36-172-01** 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	55	55
CALICHIE	WB	55	69	14
CLAY		69	84	15
CALICHIE	WB	84	99	15
CLAY		99	115	16
CALICHIE	WB	115	123	8
CLAY		123	141	18
CALICHIE	WB	141	153	12
CLAY		153	160	7

8. WELL CONSTRUCTION
 Depth Drilled **160** Feet Depth Cased **160** Feet

HOLE DIAMETER (BIT SIZE)
 From **12.25** Inches To **0** Feet **160** Feet
 From _____ Inches To _____ Feet _____ Feet
 From _____ Inches To _____ Feet _____ Feet

CASING SCHEDULE

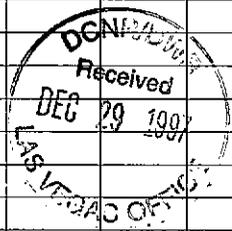
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8.625	16.94	.188	0	160

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

From	To	feet to	feet
120	140		
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Surface Seal: Yes No Seal Type:
 Depth of Seal **50** Neat Cement
 Placement Method: Pumped Concrete Grout
 Poured

Gravel Packed: Yes No
 From **50** feet to **160** feet



Date started **9/22/97**, 19____
 Date completed **9/23/97**, 19____

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 **55** 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
 Address **PO 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 Dan*
 By driller performing actual drilling on-site or contractor
 Date **12/17/97**

