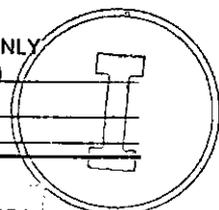


STATE OF NEVADA
 DIVISION OF WATER RESOURCES
 WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 69655
 Permit No. _____
 Basin 162



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. 15554

1. OWNER Georgann Deken
 MAILING ADDRESS 381 W. Megan
Pahrump, NV 89048

ADDRESS AT WELL LOCATION _____
381 W. Megan

2. LOCATION NW 1/4 SE 1/4 Sec. 16 T SE 19
 PERMIT NO. _____
 Issued by Water Resources _____ Parcel No. 29-262-04

N 53E E Nye _____ County
Country Place 2 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	Thickness
Brown Silt		0	12	12
Brown Calache		12	18	6
White Clay		18	35	17
Brown Clay and Gravel		35	47	12
Brown Clay and Gravel		47	59	12
Brown Calache	x	59	66	7
Gravel	x	66	80	14
Clay and Gravel	x	80	98	18
Gravel	x	98	110	12
Brown Calache with Gravel	x	110	135	25
Gravel	x	135	155	20
White Calache and Clay	x	155	180	25
Gravel and Calache	x	180	200	20
Gravel	x	200	215	15

8. WELL CONSTRUCTION

Depth Drilled 215 Feet Depth Cased 215 Feet
 HOLE DIAMETER (BIT SIZE)
 From _____ To _____
12 3/4 Inches 0 Feet 215 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>3.7</u>	<u>.280</u>	<u>0</u>	<u>120</u>

Perforations:
 Type perforation Saw Cut
 Size perforation .188
 From 140 feet to 215 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 215 feet

Date started 8/15/97 _____ .19
 Date completed 8/15/97 _____ .19

7. WELL TEST DATA

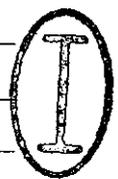
TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>50</u>	<u>n/a</u>	<u>.50</u>

9. WATER LEVEL

Static water level 50 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 Strickland Construction Co., Inc. Contractor
 Address 2301 Winery Road Suite 2 Contractor
Pahrump, NV 89041
 Nevada contractor's license number issued by the State Contractor's Board 40277
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2086
 Signed [Signature]
 By driller performing actual drilling on-site or contractor
 Date 8.17.97



Handwritten notes:
 Javel KC
 8/22/97