

PRINT OR TYPE ONLY
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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. 29445

1. OWNER Morton Meahan ADDRESS AT WELL LOCATION 2150 Phelps Rd Fallon, NV 89406
 MAILING ADDRESS 2161 W. Williams Ave #200 Fallon, NV 89406

2. LOCATION SE 1/4 NE 1/4 Sec 30 T 19 N R 28 E Churchill County
 PERMIT NO. 8-574-06 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 |
|-------------|--------------|------|-----|------------|
| Sand & Clay | | 0 | 20 | 20 |
| Sand | | 20 | 25 | 5 |
| Clay | | 25 | 27 | 2 |
| Sand | | 27 | 38 | 11 |
| Silt Clay | | 38 | 45 | 7 |
| Silt Gravel | Silt | 45 | 70 | 25 |
| Brown Clay | | 70 | 90 | 20 |
| Coarse Sand | | 90 | 108 | 18 |
| Clay | | 108 | # | # |

8. WELL CONSTRUCTION
 Depth Drilled 108 Feet Depth Cased 108 Feet

HOLE DIAMETER (BIT SIZE)
 From To
10 Inches 0 Feet 100 Feet
6 Inches 0 Feet 108 Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|------------|
| <u>6.575</u> | <u>13.88</u> | <u>.188</u> | <u>0</u> | <u>108</u> |

Perforations:
 Type perforation 4" machined
 Size perforation 3/8 x 3
 From 108 feet to 101 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal 100'
 Placement Method: Pumped Poured

Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 25' feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cold °F Quality good

Date started 2/4, 1998
 Date completed 2/23, 1998

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

| G.P.M. | Draw Down (Feet Below Static) | Time (Hours) |
|-----------|-------------------------------|--------------|
| <u>50</u> | <u>0</u> | <u>6</u> |

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Wernor Cannon Contractor
 Address 4555 Hwy 50 W Silver Spring, NV 89429 Contractor
 Nevada contractor's license number issued by the State Contractor's Board 23317
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1455
 Signed Wernor Cannon Jr.
 By driller performing actual drilling on site or contractor
 Date 2/13/98