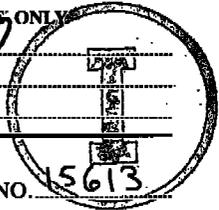


STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 71110
 Permit No. _____
 Basin. 212



NOTICE OF INTENT NO. 15613

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

1. OWNER Desert Spring LLC ADDRESS AT WELL LOCATION 3501 E. SARARA AVE.
 MAILING ADDRESS 3175 KPOK LANE
Riverside CA 92501

2. LOCATION SW 1/4 SW 1/4 Sec 6 T 21 R/S R 62 E CLARK County
 PERMIT NO. 161-06-402-003

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 Auger

6. LITHOLOGIC LOG MW-2

| Material | Water Strata | From | To | Thick-ness |
|------------------------------|--------------|------------|------------|------------|
| <u>Fill - gradually sand</u> | | <u>0</u> | <u>1</u> | |
| <u>SILTY CLAY</u> | | <u>1</u> | <u>5</u> | |
| <u>CALICHE</u> | | <u>5</u> | <u>5.5</u> | |
| <u>SANDY CLAY</u> | | <u>5.5</u> | <u>8</u> | |
| <u>SANDY SILT</u> | | <u>8</u> | <u>9</u> | |
| <u>FILTY CLAY</u> | <u>Y</u> | <u>9</u> | <u>16</u> | |
| <u>SANDY CLAY</u> | <u>Y</u> | <u>16</u> | <u>20</u> | |

8. WELL CONSTRUCTION
 Depth Drilled 20 Feet Depth Cascd 20 Feet

HOLE DIAMETER (BIT SIZE)
 From 6.5 Inches To 0 Feet 20 Feet
 Inches Feet Feet
 Inches Feet Feet

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|-----------|
| <u>2</u> | <u>PVC</u> | <u>sch 40</u> | <u>0</u> | <u>20</u> |

Perforations:
 Type perforation slotted screen
 Size perforation .010 inch
 From 5 feet to 20 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Depth of Seal 4

Placement Method: Pumped Poured

Gravel Packed: Yes No
 From 4 feet to 20 feet

9. WATER LEVEL
 Static water level 8.92 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 4/7, 1998
 Date completed 4/7, 1998

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Tim Aten c/o TERRACON
 Address 4343 S. Polaris
LV NV 89103

Nevada contractor's license number issued by the State Contractor's Board _____
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M2087

Signed Keith Dan
 By driller performing actual drilling on site or contractor
 Date 4/13/98