

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. 33466

1. OWNER Green + Land's End ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS PO Box 967 Anthony St
Winnemucca NV 89446 Winnemucca, NV
 2. LOCATION NW 1/4 SE 1/4 Sec 8 T. 33 N/S R. 38 E Pershing County
 PERMIT NO. Block 9 Lot A Domestic Green Acres
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 | Thickness |
|----------------------|--------------|-----------|------------|-----------|
| <u>Topsoil</u> | | <u>0</u> | <u>10</u> | <u>10</u> |
| <u>Sand + Rock</u> | | <u>10</u> | <u>30</u> | <u>30</u> |
| <u>Gravel</u> | <u>yes</u> | <u>30</u> | <u>40</u> | <u>10</u> |
| <u>Clay Sand</u> | | <u>40</u> | <u>80</u> | <u>40</u> |
| <u>Gravel + sand</u> | <u>yes</u> | <u>80</u> | <u>116</u> | <u>36</u> |

8. WELL CONSTRUCTION
 Depth Drilled 116 Feet Depth Cased 116 Feet
 HOLE DIAMETER (BIT SIZE)
 From _____ To _____
16 5/8 Inches 0 Feet 116 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>10</u> | <u>1.88</u> | <u>+1</u> | <u>116'</u> |

Perforations:
 Type perforation Factory Cut
 Size perforation 3/2 x 2
 From 100 feet to 116 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type: Neat Cement Cement Grout Concrete Grout
 Depth of Seal 50
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 78 feet below land surface
 Artesian flow n/a G.P.M. n/a P.S.I.
 Water temperature 60 °F Quality Good

Date started 6-20-98, 19_____
 Date completed 6-23-98, 19_____

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

| G.P.M. | Draw Down (Feet Below Static) | Time (Hours) |
|--------|-------------------------------|--------------|
| | | <u>3</u> |

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Fred Anderson Contractor
 Address 10760 Grass Valley Rd Contractor
Winnemucca NV
 Nevada contractor's license number issued by the State Contractor's Board 021467
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2053
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 6-24-98