

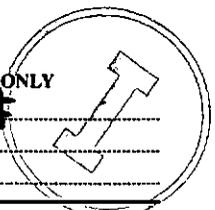
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OFFICE USE ONLY

Log No. ~~12008~~

Permit No. ~~12008~~

Basin 162



PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

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. 17103

1. OWNER Don Richmond ADDRESS AT WELL LOCATION 3331 RAND ST
 MAILING ADDRESS _____
 2. LOCATION SW 1/4 SE 1/4 Sec 1 T 20S N 32 E NYC County _____
 PERMIT NO. 28-432-02 Parcel No. VEGAS ACRES Subdivision Name _____
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 |
|----------|--------------|------|-----|-----------|
| Clay | | 0 | 10 | 10 |
| Caliche | | 10 | 13 | 3 |
| Clay | | 13 | 29 | 16 |
| Caliche | | 29 | 33 | 4 |
| Clay | | 33 | 64 | 31 |
| Caliche | WB | 64 | 68 | 4 |
| Clay | | 68 | 86 | 18 |
| Caliche | WB | 86 | 92 | 6 |
| Clay | | 92 | 116 | 24 |
| Caliche | WB | 116 | 121 | 5 |
| Clay | | 121 | 137 | 16 |
| Caliche | WB | 137 | 140 | 3 |

8. WELL CONSTRUCTION
 Depth Drilled 140 Feet Depth Cased 140 Feet
 HOLE DIAMETER (BIT SIZE)
 From 12 1/4 Inches To 140 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|-----------|
| 8 3/8 | 16.94 | .148 | 0 | 140 |

Perforations:
 Type perforation Factory Saw cut
 Size perforation 1/2 x 3
 From 100 feet to 120 feet
 From _____ feet to _____ feet
 From _____ feet to _____ 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 140 feet

9. WATER LEVEL
 Static water level 46 feet below land surface
 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 Contractor
 Address HER 78 Box 80358 Contractor
Pahrump NV 89011
 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 Dew
 By driller performing actual drilling on site or contractor
 Date 10/3/95

Date started 10/2 1995
 Date completed 10/2 1995

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 type="checkbox"/> Air Lift | | | |

