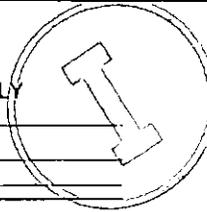


STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. **75895**
 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. **18146**

1. OWNER **Charles and Toni Barton** ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS **5800 E. Doubletree** **5800 E. Doubletree**
Pahrump, NV 89048

2. LOCATION **SE 1/4 SE 1/4 Sec. 16 T 21S N/S R 54E E Nye** County _____
 PERMIT NO. **43-071-23** Parcel No. _____ Subdivision Name _____
 Issued by Water Resources _____

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
Sandy Loam		0	12	12
Brown Clay		12	30	18
Clay		30	42	12
Clay and Calache		42	60	18
Clay and Calache	x	60	75	15
Gravel and Clay	x	75	90	15
Clay and Calache	x	90	110	20
Calache	x	110	140	30

8. WELL CONSTRUCTION
 Depth Drilled **140** Feet Depth Cased **140+1** Feet

HOLE DIAMETER (BIT SIZE)
 From To
11 Inches **0** Feet **140** Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

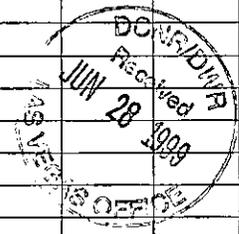
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	3.7	.280	0	140

Perforations:
 Type perforation **Sawcut**
 Size perforation **.188**

From **50** feet to **140** 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



Date started **3/23/99**, 19____
 Date completed **3/24/99**, 19____

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Bailer Draw Down (Feet Below Static)	Pump Time (Hours)	Air Lift Time (Hours)
	0			

9. WATER LEVEL
 Static water level **60** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **Cool** °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 89048
 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 _____ By driller performing actual drilling on-site or contractor
 Date **6-16-99**

