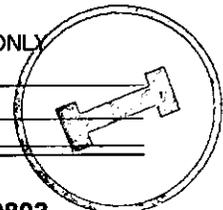


STATE OF NEVADA  
 DIVISION OF WATER RESOURCES  
 WELL DRILLER'S REPORT

OFFICE USE ONLY  
 Log No. 77459  
 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. 19803

1. OWNER **DWIGHT LEU** ADDRESS AT WELL LOCATION **2601 WARREN ST**  
 MAILING ADDRESS **2601 WARREN ST**  
**PAHRUMP, NV 89048**

2. LOCATION **SW** 1/4 **NW** 1/4 Sec. **35** T **19S** N/S R **52E** E **NYE** County  
 PERMIT NO. **27-181-55** 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 & GRAVEL		0	115	
FINE GRAVEL	WB	115	130	15
CLAY		130	145	15
GRAVEL	WB	145	158	13
CLAY		158	165	7
GRAVEL	WB	165	180	15

8. WELL CONSTRUCTION  
 Depth Drilled **180** Feet Depth Cased **180** Feet

HOLE DIAMETER (BIT SIZE)  
 From **10.25** Inches To **0** Feet  
 To **180** Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6.625	3.63	.280	0	180

Perforations:  
 Type perforation **SAW CUT**  
 Size perforation **1/8 X 3**

From	<b>140</b>	feet to	<b>180</b>	feet
From		feet to		feet
From		feet to		feet
From		feet to		feet
From		feet to		feet

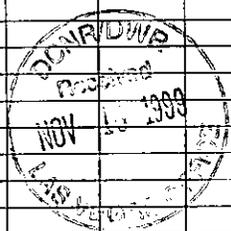
Surface Seal:  Yes  No Seal Type:  
 Depth of Seal **50**  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout

Gravel Packed:  Yes  No  
 From **50** feet to **180** feet

9. WATER LEVEL  
 Static water level **115** 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 CO. OF NEVADA, INC.** Contractor  
 Address **P.O. BOX 4220** Contractor  
**PAHRUMP, NV. 89048**  
 Nevada contractor's license number issued by the State Contractor's Board **47333**  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1642**  
 Signed Thomas Dan  
 By driller performing actual drilling on-site or contractor  
 Date **11/8/99**



Date started **11/8/99**, 19\_\_\_\_  
 Date completed **11/8/99**, 19\_\_\_\_

7. WELL TEST DATA

TEST METHOD:	TEST METHOD:		Time (Hours)
	G.P.M.	Draw Down (Feet Below Static)	
<input type="checkbox"/> Bailer			
<input type="checkbox"/> Pump			
<input type="checkbox"/> Air Lift			