

OFFICE USE ONLY
 Log No. 78914
 Permit No. _____
 Basin. 162
 NOTICE OF INTENT NO. 20139

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

1. OWNER MIKE WILDING ADDRESS AT WELL LOCATION 700 W. CALVADA BLVD.
 MAILING ADDRESS _____
 2. LOCATION SE 1/4 NW 1/4 Sec 28 T 20-S N/S R 53 E NYE County _____
 PERMIT NO. 39-073-13 CALVADA VALLEY, UT:8B, BK:14
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
SURFACE		0	4	4
GRAY CLAY		4	18	14
GRAY CLAY/CALICHE		18	46	28
BROWN CLAY	X	46	71	25
BROWN CLAY/CALICHE		71	96	25
BROWN CLAY		96	115	19
BROWN CLAY/CALICHE	X	115	140	25

8. WELL CONSTRUCTION
 Depth Drilled 140 Feet Depth Cased 140 Feet
 HOLE DIAMETER (BIT SIZE)
 From 0 To 140
12 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)
8 5/8	16.94	.188	0	140

Perforations:
 Type perforation TORCH CUT
 Size perforation 1/4" WIDTH 8" LONG
 From 100 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

9. WATER LEVEL
 Static water level 48 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 JIM PIKE WELL DRILLING, LLC. Contractor
 Address P.O. BOX 56 Contractor
PAHRUMP, NV 89041
 Nevada contractor's license number 17563A
 issued by the State Contractor's Board
 Nevada driller's license number issued by the 1812
 Division of Water Resources, the on-site driller
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date FEBRUARY 18, 2000

Date started FEBRUARY 17, 2000
 Date completed FEBRUARY 17, 2000

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift			
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
<u>20</u>	<u>4</u>	<u>1/4</u>	