

OFFICE USE ONLY
 Log No. **80218**
 Permit No. **162**
 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. 20344

1. OWNER **Nationwide Homes**
 MAILING ADDRESS **3261 W. Shadow Mountain Pahrump, NV 89048**

ADDRESS AT WELL LOCATION **3261 W. Shadow Mountain Vegas Acres**

2. LOCATION **NW 1/4 SE 1/4 Sec. 1 T 20S**
 PERMIT NO. **28-422-07**
 Issued by Water Resources Parcel No.

N/S R **52E** E **Nye** County
 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

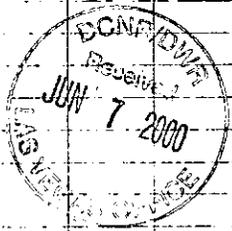
Material	Water Strata	From	To	Thickness
brown clay		0	17	17
See next line		17	24	7
brown clay with caleche strings				
brown loam		24	40	16
See next line		40	45	5
brown loam with grey caleche strings				
See next line	x	45	82	37
grey loam with caleche strings				
See next line	x	82	95	13
brown loam with caleche strings				
brown loam	x	95	140	45

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 **125** feet to **140** 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 **140** feet



Date started **4/13/00** 19__
 Date completed **4/13/00** 19__

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**

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

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 *[Signature]*
 By driller performing actual drilling on-site or contractor
 Date **4-28-00**