

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

OFFICE USE ONLY
 Log No. **80585**
 Permit No. **162**
 Basin **162**

NOTICE OF INTENT NO. 21499

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

1. OWNER **Nationwide Homes**
 MAILING ADDRESS **3021 W. Medicine Man Pahrump, NV 89048**

2. LOCATION **SE 1/4 SE 1/4 Sec. 13 T 20S**
 PERMIT NO. **28-631-01**
 Issued by Water Resources Parcel No.

ADDRESS AT WELL LOCATION **3021 W. Medicine Man**

N/S R 52E E Nye County
Charleston Park Subdivision Name

3. WORK PERFORMED
 New Well Deepen
 Replace Abandon
 Recondition Other

4. PROPOSED USE
 Domestic Municipal/Industrial
 Irrigation Monitor
 Test Stock

5. WELL TYPE
 Cable Air
 Rotary
 RVC Other

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thickness |
|---------------------------------|--------------|------|-----|-----------|
| brown silt | | 0 | 10 | 10 |
| brown silt with clay | | 10 | 38 | 28 |
| See next line | x | 38 | 140 | 102 |
| brown clay with caleche strings | | | | |

8. WELL CONSTRUCTION

Depth Drilled **140** Feet
 Depth Cased **140+1** Feet

HOLE DIAMETER (BIT SIZE)

| Inches | From | To | Feet | Feet |
|--------|------|-----|------|------|
| 11 | 0 | 140 | 140 | 140 |
| | | | | |
| | | | | |

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 | feet to | feet |
|------|---------|------|
| 125 | 140 | 140 |
| | | |
| | | |
| | | |
| | | |

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Placement Method: Pumped
 Poured

Gravel Packed: Yes No
 From **50** feet to **140** feet

AUG 3 2000

9. WATER LEVEL
 Static water level **56** feet below land surface
 Artesian flow
 Water temperature **cool** °F Quality **good** G.P.M. P.S.I.

Date started **7/31/00** 19__
 Date completed **7/31/00** 19__

7. WELL TEST DATA

| TEST METHOD: | Bailer Draw Down (Feet Below Static) | Pump | Air Lift |
|--------------|--------------------------------------|--------------|----------|
| G.P.M. | | 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 **7.31.00**