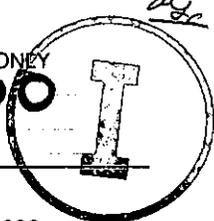


STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. **80600**
 Permit No. **162**
 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. 19633

1. OWNER **AVCO/Whitehead**
 MAILING ADDRESS **3480 W. Verde**
Pahrump, NV 89048

ADDRESS AT WELL LOCATION
3480 W. Verde

2. LOCATION **SE 1/4 SE 1/4 Sec. 32 T 20S**
 PERMIT NO. **40-572-09**
 Issued by Water Resources Parcel No.

N/S R **53E** E **Nye** County
Calvada Valley Subdivision Name

3. WORK PERFORMED
 New Well
 Deepen
 Replace
 Abandon
 Recondition
 Other

4. PROPOSED USE
 Domestic
 Municipal/Industrial
 Irrigation
 Monitor

5. WELL TYPE
 Rotary
 RVC
 Cable
 Air
 Stock
 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
brown clay		0	12	12
brown caleche		12	15	3
brown clay		15	18	3
grey clay		18	22	4
brown clay		22	46	24
brown caleche	x	46	140	94

8. WELL CONSTRUCTION

Depth Drilled **160** Feet
 Depth Cased **161** Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	Feet	To	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)

Perforations:

Type perforation **sawcut**
 Size perforation **.188**

From	feet to	feet

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

Gravel Packed: Yes No
 From **50** feet to **160** feet

9. WATER LEVEL

Static water level **67** 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 *[Signature]*
 By driller performing actual drilling on-site or contractor

Date **7-31-00**

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

7. WELL TEST DATA

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

