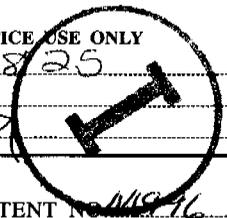


OFFICE USE ONLY
 Log No. 83825
 Permit No. _____
 Basin 40



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. 14976

1. OWNER GONZALO RODRIGUEZ ADDRESS AT WELL LOCATION None
 MAILING ADDRESS ARENA WAY #2
ELKO, NV 89801

2. LOCATION SE 1/4 SW 1/4 Sec 12 T. 34 N. R. 56.55 E. ELKO County
 PERMIT NO. N/A Issued by Water Resources Parcel No. 40736, ELKA Subdivision Name LAST CHANCE RANCH UNIT #3

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
Mixed Sand/clay (spindle)		0	28	28
GRAVEL (dry)		28	32	4
Sandy clay		32	100	68
Cemented Sand & Gravel	4gpm	100	102	2
Clay		102	139	37
Sandy clay (increases to 5gpm)		139	157	18
Sandy clay		157	243	86
Coarse sand (concrete)	12gpm	243	254	11
Clay		254	257	3
T.P. 251				

8. WELL CONSTRUCTION
 Depth Drilled 257 Feet Depth Cased 258 Feet

HOLE DIAMETER (BIT SIZE)
 From To
10 Inches 0 Feet 50 Feet
8 Inches 50 Feet 257 Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 7/8</u>	<u>12.92</u>	<u>.188</u>	<u>±1</u>	<u>257</u>

Perforations:
 Type perforation Torch cut
 Size perforation 1/8 x 5

From _____	feet to _____	feet
From <u>97</u>	feet to <u>102</u>	feet
From <u>142</u>	feet to <u>157</u>	feet
From <u>197</u>	feet to <u>252</u>	feet
From _____	feet to _____	feet

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

Depth of Seal 50

Placement Method: Pumped
 Poured

Gravel Packed: Yes No
 From 50 feet to 257 feet

9. WATER LEVEL
 Static water level 7.8 feet below land surface
 Artesian flow N/A G.P.M. _____ P.S.I. _____
 Water temperature Cold °F Quality Very good

Date started 6-19-01, 19__
 Date completed 6-22-01, 19__

7. WELL TEST DATA

TEST METHOD: <input checked="" type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
<u>12</u>	<u>122</u>	<u>1 hr.</u>	

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Name MUTH DRILLING Co. Contractor
 Address 203 PINE ST. Contractor
ELKO, NV 89801

Nevada contractor's license number issued by the State Contractor's Board 10819
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 652

Signed James E. Muth
 By driller performing actual drilling on site or contractor
 Date 6/25/01