

OFFICE-USE-ONLY
 Log No. 86751
 Permit No. 162
 Basin. 162
 NOTICE OF INTENT NO. 22271
1140

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 DUANE WOLF ADDRESS AT WELL LOCATION WEST BLTZ PAHRUMP NV
 MAILING ADDRESS _____
 2. LOCATION NE 1/4 NE 1/4 Sec. 8 T. 20 N/S R. 33 E N7E County _____
 PERMIT NO. 35-151-25 Issued by Water Resources Parcel No. _____ Subdivision Name _____

3. WORK PERFORMED
 New Well Replace Recondition Deepen Abandon Other _____
 4. PROPOSED USE
 Domestic Municipal/Industrial Irrigation Monitor Test Stock
 5. WELL TYPE
 Cable Rotary RVC Air Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>AIR</u>		<u>0</u>	<u>49</u>	
<u>CLAY CALICHE</u>		<u>50</u>	<u>78</u>	
<u>CLAY GRAVEL</u>		<u>79</u>	<u>100</u>	
<u>CALICHE CLAY</u>		<u>101</u>	<u>125</u>	
<u>CLAY</u>		<u>126</u>	<u>162</u>	

DOWNHOLE RECEIVED
 JUL 19 2002
 LAS VEGAS OFFICE

8. WELL CONSTRUCTION
 Depth Drilled 162 Feet Depth Cased 162 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 Inches 0 Feet 162 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6</u>	<u>PVC</u>	<u>SCH 40</u>	<u>0</u>	<u>162</u>

Perforations:
 Type perforation FACTORY SLOT
 Size perforation .020
 From _____ feet to _____ feet
 From 162 feet to 135 feet
 From _____ feet to _____ feet
 From _____ feet to _____ 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 162 feet

9. WATER LEVEL
 Static water level 51 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature COLD °F Quality GOOD

Date started 5-24 2002
 Date completed 5-25 2002

7. WELL TEST DATA

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

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name G. ARZKE DRILLING Contractor
 Address PO BOX 6678 PAHRUMP NV Contractor
 Nevada contractor's license number issued by the State Contractor's Board 36415
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1650
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 5-25-2002