

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

OFFICE USE ONLY
 Log No. 88354
 Permit No. 33668
 Basin 153

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. **50583**

1. OWNER Larry Wiseheart ADDRESS AT WELL LOCATION Diamond Valley, NV
 MAILING ADDRESS P.O. Box 249
Kersey, CO 80644

2. LOCATION NW 1/4 NE 1/4 Sec. 20 T. 21N N/S R 54E E Eureka County
 PERMIT NO. 33668 Issued by Water Resources Parcel No. 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
Gravel		0	58	58
Cobbel Stone		58	83	25
Clay w/Gravel		83	94	11
Cobble Stone		94	107	13
Cobble w/Clay Steaks		107	120	13
Cobbel Stone		120	144	24
Gravel w/Clay		144	174	30
Cement Gravel		174	215	41
Clay w/Gravel		215	223	8
Gravel	X	223	227	4
Cement Gravel		227	247	20
Cement Gravel w/Clay		247		
Stringers			264	17
Hard Cement Gravel		264	317	53
Cement Gravel with Clay Stringers			322	5
Brown Clay		322	324	2
Gravel & Cobble Stone		324	335	11
Cemented Gravel	X	335	343	8
Gravel		343	345	2
Cement gravel med Hard	X	345	360	15
Brown Clay		360	367	7
Gravel w Clay		367	380	13
Gravel	XX	380	392	12
Cemented Gravel		392	403	11

8. WELL CONSTRUCTION
 Depth Drilled 403 Feet Depth Cased 403 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To
36	0	50
26	50	403

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
30	20.75	.065	0	50
16	42.00	.250	+1	403

Perforations:
 Type perforation Mill Cut
 Size perforation Double Row 1/8

From 203 feet to 403 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 0 feet to 50 feet

9. WATER LEVEL
 Static water level 195 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cool °F Quality unknown

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Parsons Drilling, Inc. Contractor
 Address P.O. Box 1265 Contractor
Fallon Nv. 89407-1265
 Nevada contractor's license number issued by the State Contractor's Board 29064
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1753

Signed W. Parsons
 By driller performing actual drilling on-site or contractor
 Date 10/17/2002

Date started 08/19/2002, 19
 Date completed 08/25/2002, 19

7. WELL TEST DATA

TEST METHOD:	<input type="checkbox"/> Bailer	<input checked="" type="checkbox"/> Pump	<input type="checkbox"/> Air Lift
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
800	50ft	1 hr	
900	55	1hr	