

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

OFFICE USE ONLY

Log No. 89370
 Permit No. _____
 Basin 049

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. 47409

1. OWNER Al Parks Petroleum Inc ADDRESS AT WELL LOCATION 1600 Idaho St. Elko NV 89801
 MAILING ADDRESS _____
 2. LOCATION SE 1/4 SW 1/4 Sec 11 T 34 N/S R 55 E Elk County _____
 PERMIT NO. NDPE 60000-9 001-390-003 Parcel No. _____ Subdivision Name _____

3. WORK PERFORMED
 New Well Replace Recondition Domestic
 Deepen Abandon Other _____ Municipal/Industrial Irrigation Test Stock

5. WELL TYPE
 Cable Rotary RVC
 Air Other Auger

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thick-ness |
|--------------|--------------|------|----|------------|
| Clay Sand | | 0 | 10 | 10 |
| Sand Gravel | | 10 | 40 | 30 |
| Large Gravel | | 40 | 60 | 20 |
| Light Clay | | 60 | 75 | 15 |

Hole Abandoned
 Could not Case
 Grouted 75 to 20'
 Cemented 20' to 0'

75R Abandoned
 30R Cement

8. WELL CONSTRUCTION
 Depth Drilled 75 Feet Depth Cased 75 Feet

HOLE DIAMETER (BIT SIZE)
 From _____ To _____
 Inches _____ Feet _____ Feet _____
 Inches _____ Feet _____ Feet _____
 Inches _____ Feet _____ Feet _____

CASING SCHEDULE

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

Perforations:
 Type perforation _____
 Size perforation _____
 From _____ feet to _____ feet
 From _____ feet to _____ feet

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

Depth of Seal _____
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From _____ feet to _____ feet

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

| G.P.M. | Draw Down (Feet Below Static) | Time (Hours) |
|--------|-------------------------------|--------------|
| | | |
| | | |
| | | |

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

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

Name Shetles Exploration Inc Contractor
 Address P.O. Box 547 Contractor
Be He Mtn NV 89820
 Nevada contractor's license number 0029456
 issued by the State Contractor's Board
 Nevada driller's license number issued by the 1795
 Division of Water Resources the on-site driller
 Signed Floyd Petersen
 by driller performing actual drilling on site or contractor
 Date 12-6-02

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 02 DEC 11 PM 1:37
 STATE DRILLERS OFFICE