

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

OFFICE USE ONLY
Log No. 90988
Permit No. 212
Basin 212

NOTICE OF INTENT NO. 2181

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

1. OWNER LAEL BALLY Rebel Oil Corp ADDRESS AT WELL LOCATION 1721 W. CIMARRON BLVD LAS VEGAS NV County CLAYTON
MAILING ADDRESS 2200 S. HARMONY DR. LAS VEGAS NV 89102-4162
2. LOCATION SE 1/4, SN 1/4, Sec 33 T 28 N R 10 E CLAYTON County CLAYTON
PERMIT NO. 139334060021 Parcel No. 139334060021 Subdivision Name #165

3. WORK PERFORMED
 New Well
 Replace
 Abandon
 Recondition
 Other
 PROPOSED USE
 Domestic
 Municipal/Industrial
 Irrigation
 Monitor
 Test
 Stock
 Cable
 Rotary
 Other HSAVC

6. LITHOLOGIC LOG

Material	Water Static	From	To	Thick-ness
<u>PRESSURE GROUT</u>		<u>0</u>	<u>25</u>	
<u>WELL HEAD</u>				
<u>OUT BOX</u>				
<u>CONCRETE SURFACE</u>				

8. WELL CONSTRUCTION

Depth Drilled: 25 Feet

HOLE DIAMETER (BIT SIZE)

From 2 Inches To 2.5 Feet
 From 0 Feet To 2.5 Feet
 From 0 Feet To 2.5 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
 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

9. WATER LEVEL

Static water level _____ feet below land surface

Artesian flow _____ G.P.M.

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 WDC EXPLORATION Contractor
 Address 1421 S. 39th AVE
PUEBLO AZ 85009 Contractor 0012852

Nevada contractor's license number _____
 issued by the State Contractor's Board _____
 Nevada driller's license number issued by the Division of Water Resources the on-site driller M-2183

Signed _____
 Date 5/28/03
 By driller performing actual drilling on site or contractor

7. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

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

Date started 5/28/03 20 _____
 Date completed 5/28/03 20 _____