

WELL DRILLER'S REPORT

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

OFFICE USE ONLY
Log No. 90991
Permit No. 212
Basin 212

NOTICE OF INTENT NO. 24561

1. OWNER LORI BAILY, PERPET OIL CORP. ADDRESS AT WELL LOCATION 1730 N. IMPRESSION BLVD
MAILING ADDRESS 2200 S. HIGHLAND DR. LAS VEGAS, NV
LAS VEGAS, NV 89103-4109

2. LOCATION SE 1/4, SW 1/4 Sec 33 T 3020 N, R 1 E, CLARK CO. LAS VEGAS, NV County
PERMIT NO. 130 3340604 PERPET STATION # 65 Parcel No. 130 3340604 Subdivision Name LAS

3. WORK PERFORMED
 New Well Replace Recondition
 Abandon Other.....
 PROPOSED USE
 Irrigation Test Cable Rotary RVC
 Monitor Stock Air Other MSA

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
PRESSURE GROUT		0	25	
WELL BREAK				
CUT BOX				
CONCRETE SURFACE				

8. WELL CONSTRUCTION

Depth Drilled 25 Feet Depth Cased _____ Feet

HOLE DIAMETER (BIT SIZE)

6 Inches From 6 To 25 Feet
_____ Inches From _____ To _____ Feet
_____ Inches From _____ To _____ Feet

CASING SCHEDULE

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

4. 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. AS.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 LING EXPLOREATION Contractor
 Address 1421 S 39TH AVE Contractor
PROXY #2, 850009 Contractor

Nevada contractor's license number 6012852
 issued by the State Contractor's Board 6012852
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-2188

Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 5/28/09

7. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

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

Date started 5/28/09
 Date completed 5/28/09