

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

NOTICE OF INTENT NO. 24501

1. OWNER ARAI BAILY, PEDEL CIL CORP ADDRESS AT WELL LOCATION 1781 S. CHARLESTON BLVD
MAILING ADDRESS 2200 S. HONOLULU AVE LOS VEGAS, NV 89103-4629 LOS VEGAS, NV County
2. LOCATION SE 1/4, SW 1/4, Sec. 33, T. 20S, R. 61E, GAR PEDEL STATION #165 County
PERMIT NO. 13433466 0091 Parcel No. 13433466 0091 Subdivision Name

3. WORK PERFORMED
 New Well
 Replace
 Abandon
 Deepen
 Recondition
 Other
 Domestic
 Municipal/Industrial
 Irrigation
 Monitor
 Stock
 Test
 Air
 Cable
 Rotary
 Other HS4

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>PRESSURE APPROP</u>		<u>0</u>	<u>25</u>	
<u>NEAL DEBRIS</u>				
<u>OLD WDK</u>				
<u>CONCRETE SURFACE</u>				

8. WELL CONSTRUCTION

Depth Drilled: 25 Feet Depth Cased: _____ Feet

HOLE DIAMETER (BIT SIZE)

8 Inches From 0 Feet To 25 Feet
_____ Inches From _____ Feet To _____ Feet
_____ Inches From _____ Feet To _____ 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

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. 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 WDC EXPLOREATION CO
 Address: 1491 S 34TH AVE
PROVINCIA AZ 85009
 Nevada contractor's license number 00128532
 Issued by the State Contractor's Board.

Nevada driller's license number issued by the Division of Water Resources, the on-site driller: 1M-2183

Signed: [Signature]
 By driller performing actual drilling on site or contractor

Date: 5/28/05

Date started: 5/28/05 20
 Date completed: 5/28/05 20

7. WELL TEST DATA

TEST METHOD:	Bailer	Pump	Air Lift
G.P.M. (Feet Below Static)			
Time (Hours)			