

OFFICE USE ONLY
 Log No. 93188
 Permit No. _____
 Basin 162

PRINT OR TYPE ONLY
 NOT WRITE ON BACK

WELL DRILLER'S REPORT

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

NOTICE OF INTENT NO. 26354

1. OWNER ROBERT & JANET OLIVER ADDRESS AT WELL LOCATION 1621 W. CHUKAR
 MAILING ADDRESS 1621 W. CHUKAR
PAHRUMP, NV

2. LOCATION NE 1/4 SW 1/4 Sec. 8 T 20 N/S R 53 E NYE County
 PERMIT NO. 36-101-04 CHAPPAREL RANCHOS
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 |
|----------|--------------|------|-----|-----------|
| CLAY | | 0 | 15 | 15 |
| CALICHE | | 15 | 23 | 8 |
| CLAY | | 23 | 45 | 22 |
| CALICHE | | 45 | 56 | 11 |
| CLAY | | 56 | 65 | 9 |
| CALICHE | WB | 65 | 75 | 10 |
| CLAY | | 75 | 86 | 11 |
| CALICHE | WB | 86 | 100 | 14 |
| CLAY | | 100 | 118 | 18 |
| CALICHE | WB | 118 | 125 | 7 |
| CLAY | | 125 | 132 | 7 |
| CLAICHE | WB | 132 | 140 | 8 |
| CLAY | | 140 | 150 | 10 |
| CALICHE | WB | 150 | 160 | 10 |

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8. WELL CONSTRUCTION
 Depth Drilled 160 Feet Depth Cased 160 Feet

HOLE DIAMETER (BIT SIZE)

| | |
|-----------|-----------------|
| From | To |
| 10 Inches | 0 Feet 160 Feet |
| Inches | Feet Feet |
| Inches | Feet Feet |

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|-----------|
| 6 | 3.63 | .250 | 0 | 160 |

Perforations:
 Type perforation SAWCUT
 Size perforation 1/8 X 3
 From 100 feet to 160 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No
 Depth of Seal 50
 Placement Method: Pumped Poured
 Seal Type: Neat Cement Cement Grout Concrete Grout
 Gravel Packed: Yes No
 From 50 feet to 160 feet

9. WATER LEVEL
 Static water level 55 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 GREAT BASIN DRILLING CO. OF NEVADA, INC.
 Address P.O. BOX 4220
PAHRUMP, NV. 89048

Date started 5/4/2004 2004, 19____
 Date completed 5/11/2004, 19____

7. WELL TEST DATA

| TEST METHOD: | G.P.M. | Draw Down (Feet Below Static) | Time (Hours) |
|---|--------|-------------------------------|--------------|
| <input type="checkbox"/> Bailor <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift | | | |
| | | | |
| | | | |

Nevada contractor's license number issued by the State Contractor's Board 47333
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2063
 Signed _____
 Date 5/13/04