

Log No. 93519
 Permit No. _____
 Basin. 117

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 DO 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. 25905

1. OWNER Wright Trust ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS _____
 2. LOCATION SE 1/4 SW 1/4 Sec. 5 T. 4 N/S R. 36 E. Pomerole County _____
 PERMIT NO. 007-671-49 Fish Lake Valley Ranches Subdivision Name _____
Issued by Water Resources Parcel No.

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 | Thick-ness |
|-------------------|--------------|------|-----|------------|
| Sand Clay | | 0 | 7 | |
| Gravel | | 7 | 36 | |
| Clay | | 36 | 54 | |
| Gravel Clay | | 54 | 143 | |
| cobbles | | 143 | 160 | |
| Clay | | 160 | 171 | |
| Gravel | | 171 | 200 | |
| DUPLICATE | | | | |
| DCNR/DWR RECEIVED | | | | |
| SEP 27 2004 | | | | |
| LAS VEGAS OFFICE | | | | |

8. WELL CONSTRUCTION
 Depth Drilled 200 Feet Depth Cased 200 Feet
 HOLE DIAMETER (BIT SIZE)
 From _____ To _____
10 5/8 Inches 1 Feet 200 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|------------|
| <u>6 5/8</u> | <u>13</u> | <u>1.88</u> | <u>1</u> | <u>21</u> |
| <u>6 5/8</u> | <u>PVC</u> | <u>40</u> | <u>21</u> | <u>200</u> |

Perforations:
 Type perforation Machine Perc
 Size perforation 3/16 x 4 x 5 rows
 From 171 feet to 200 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal 50
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 50 feet to 200 feet

9. WATER LEVEL
 Static water level 84 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 0 °F Quality Good

Date started 4/27/04, 19_____
 Date completed same, 19_____

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

| G.P.M. | Draw Down (Feet Below Static) | Time (Hours) |
|--------------|-------------------------------|--------------|
| <u>15-20</u> | <u>2 hrs</u> | |
| | | |
| | | |

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Boach Drilling Inc Contractor
 Address PO. 599 Contractor
28 89428
 Nevada contractor's license number issued by the State Contractor's Board 0031841
 Nevada driller's license number issued by the Division of Water Resources the on-site driller 1740
 Signed T. Althoff
 By driller performing actual drilling on site or contractor
 Date May 7/04