

STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 96221
 Permit No. _____
 Basin 162
 NOTICE OF INTENT NO. **29331**

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

1. OWNER **PHILIP & PAMELA RANERI** ADDRESS AT WELL LOCATION **2331 SHADOW MTN ST.**
 MAILING ADDRESS **2331 SHADOW MTN ST**
PAHRUMP, NV

2. LOCATION NW 1/4 SE 1/4 Sec. 6 T 20S N/S R 53E E NYE County
 PERMIT NO. 36-523-02 **SHADOW MOUNTAIN ESTATES**
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	11	11
CALICHE		11	20	9
CLAY		20	48	28
CALICHE	WB	48	60	12
CLAY		60	84	24
CALICHE	WB	84	96	12
CLAY		96	118	22
CALICHE	WB	118	136	18
CLAY		136	150	14
CALICHE	WB	150	165	15
CLAY		165	180	15

DOWNHOLE RECEIVED
MAY 02 2005
LAS VEGAS OFFICE

8. WELL CONSTRUCTION
 Depth Drilled 180 Feet Depth Cased 180 Feet

HOLE DIAMETER (BIT SIZE)
 From 10 Inches To 0 Feet 180 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	180

Perforations:
 Type perforation **SAWCUT**
 Size perforation 1/8 X 3

From 120 feet to 180 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 180 feet

9. WATER LEVEL
 Static water level 52 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

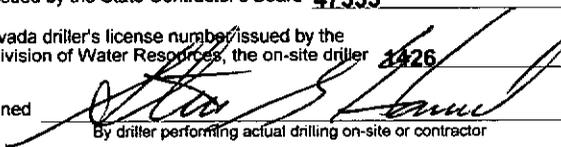
Date started 4/21/2005, 19____
 Date completed 4/21/2005, 19____

7. WELL TEST DATA

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

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.** Contractor
 Address **P.O. BOX 4220** Contractor
PAHRUMP, NV, 89048
 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 **1426**

Signed 
 By driller performing actual drilling on-site or contractor
 Date 4/28/05