

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

OFFICE USE ONLY
 Log No. 96612
 Permit No. _____
 Basin 162

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. **29360**

1. OWNER HOU KIM ADDRESS AT WELL LOCATION 2290 S MURPHY
 MAILING ADDRESS 2290 S MURPHY
PAHRUMP, NV

2. LOCATION SE 1/4 NW 1/4 Sec. 25 T 20S N/S R 52E E NYE County
 PERMIT NO. 27-581-40 Parcel No. _____ Subdivision Name _____
 Issued by Water Resources _____

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
CLAY		0	74	74
CALICHE	WB	74	78	4
CLAY		78	124	46
CALICHE	WB	124	131	7
CLAY		131	156	25
CALICHE	WB	156	164	8
CLAY		164	188	24
CALICHE	WB	188	200	12

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8. WELL CONSTRUCTION
 Depth Drilled 200 Feet Depth Cased 200 Feet

HOLE DIAMETER (BIT SIZE)
 From 10.25 Inches To 0 Feet
 To 200 Feet
 _____ Inches _____ Feet
 _____ Inches _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6	3.63	.250	0	200

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

From 140 feet to 200 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 200 feet

9. WATER LEVEL
 Static water level 62 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. 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 1642

Signed Thomas D.
 By driller performing actual drilling on-site or contractor
 Date 5/17/05

Date started 5/17/2005, 19
 Date completed 5/17/2005, 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			