

PRINT OR TYPE ONLY
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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. **27612**

1. OWNER **KEITH + STEPHANIE MARKLEY** ADDRESS AT WELL LOCATION **2151 E. LYENE ST. Pahrump NV.**
 MAILING ADDRESS _____

2. LOCATION **NW 1/4 NW 1/4 Sec. 12 T. 20 N. R. 53 E. Nye** County
 PERMIT NO. **35-253-16** Issued by Water Resources Parcel No. **GREEN VALLEY ESTATES** Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition Deepen Abandon Other _____

4. PROPOSED USE
 Domestic Municipal/Industrial Irrigation Monitor Test Stock

5. WELL TYPE
 Cable Rotary RVC Air Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
ROCK + GRAVEL		0	75	75
CLAY + GRAVEL		75	135	60
CEMENTED GRAVEL		135	175	40
CLAY + GRAVEL		175	200	25
ROCK + GRAVEL	W.B.	200	325	125

DUNK/DWR
RECEIVED
MAY 26 2005
LAS VEGAS OFFICE

8. WELL CONSTRUCTION
 Depth Drilled **325** Feet Depth Cased **325** Feet

HOLE DIAMETER (BIT SIZE)

	From	To
10 5/8 Inches	0	60
9 5/8 Inches	60	325

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	4.33	.316	0	325

Perforations:
 Type perforation **SAW CUT**
 Size perforation **4 INCH BY 6 INCH**
 From **325** feet to **285** feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal **50 FT.**
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From **325** feet to **50** feet

9. WATER LEVEL
 Static water level **195** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **COOL** °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 **BUDGET DRILLING CO.** Contractor
 Address **P.O. Box 3505 Pahrump NV. 89041** Contractor
 Nevada contractor's license number **40020** issued by the State Contractor's Board
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1573**
 Signed **[Signature]**
 By driller performing actual drilling on site or contractor
 Date **4-28-2005**

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

Date started **4-25-2005**
 Date completed **4-27-2005**