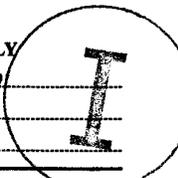


OFFICE USE ONLY
Log No. 98096
Permit No. _____
Basin. 102



PRINT OR TYPE ONLY
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. 55787

1. OWNER Francis Faddio ADDRESS AT WELL LOCATION 5380
MAILING ADDRESS _____
2. LOCATION SE 1/4 NE 1/4 Sec 2 T 17 N/S R 24 E Lyon County _____
PERMIT NO. 07-012-06 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 |
|-----------------------|--------------|------------|------------|-----------|
| <u>Sand Gravel</u> | | <u>1</u> | <u>6</u> | |
| <u>Clay</u> | | <u>6</u> | <u>27</u> | |
| <u>Bidcock Shell</u> | | <u>27</u> | <u>286</u> | |
| <u>Fractured</u> | | | | |
| <u>Lime Stone</u> | | <u>286</u> | <u>395</u> | |
| <u>Lost SON -</u> | | | | |
| <u>LOST DRILL RIG</u> | | | | |
| <u>TIPED OUT</u> | | | | |

8. WELL CONSTRUCTION
Depth Drilled 395 Feet Depth Cased 395 Feet

HOLE DIAMETER (BIT SIZE)
From _____ To _____
10 5/8 Inches 1 Feet 100 Feet
8 3/4 Inches 100 Feet 395 Feet

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|------------|
| <u>10 5/8</u> | <u>13</u> | <u>1.88</u> | <u>1</u> | <u>20</u> |
| <u>6 5/8</u> | <u>PVC</u> | <u>SN 40</u> | <u>20</u> | <u>395</u> |

Perforations:
Type perforation Machined Pear
Size perforation 3/16 x 1/2 # 100
From 300 feet to 320 feet
From 340 feet to 360 feet
From 375 feet to 395 feet

Surface Seal: Yes No Seal Type: Neat Cement
Depth of Seal 100' Cement Grout
Placement Method: Pumped Poured Concrete Grout

Gravel Packed: Yes No
From Ø feet to _____ feet

9. WATER LEVEL
Static water level 212 feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature C °F Quality Good

Date started 5/21/05, 20____
Date completed 6/16/05, 20____

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

| G.P.M. | Draw Down (Feet Below Static) | Time (Hours) |
|---------------|-------------------------------|--------------|
| <u>12 gpm</u> | <u>45 min</u> | |

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.

Name John Driller Contractor
Address PO 589 Contractor
S.S. NV 89429
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 1976
Signed [Signature]
By driller performing actual drilling on site or contractor
Date 8/05/05

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05 AUG 12 PM 1:59
STATE ENGINEERS OFFICE