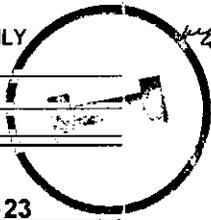


STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 98119
 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. 29123

1. OWNER STREAMLINE INVESTMENTS ADDRESS AT WELL LOCATION 4641 RETREAD
 MAILING ADDRESS 4641 RETREAD
PAHRUMP, NV

2. LOCATION NE 1/4 SW 1/4 Sec. 14 T 20S N/S R 52E E NYE County
 PERMIT NO. 41-483-05 GOLDEN SPRING RANCH UNIT 3
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	75	75
CALICHE	WB	75	81	6
CLAY		81	124	43
CALICHE	WB	124	131	7
CLAY		131	169	38
CALICHE	WB	169	176	7
CLAY		176	200	24

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

HOLE DIAMETER (BIT SIZE)
10.25 Inches From 0 Feet To 200 Feet
 Inches Feet Feet Feet
 Inches Feet Feet 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 Seal Type:
 Depth of Seal 50 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 50 feet to 200 feet

9. WATER LEVEL
 Static water level 65 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 [Signature]
 By driller performing actual drilling on-site or contractor
 Date 12/8/2005

Date started 12/7/2005, 19
 Date completed 12/7/2005, 19

7. WELL TEST DATA

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

DCNR/DWR
 RECEIVED
 DEC 16 2005
 LAS VEGAS OFFICE