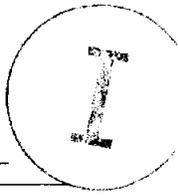


**STATE OF NEVADA
DIVISION OF WATER RESOURCES**

OFFICE USE ONLY

Log No. 98306
Permit No. _____
Basin 101



**PRINT OR TYPE ONLY
DO NOT WRITE ON BACK**

WELL DRILLER'S REPORT

Please fill in this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. **56337**

1. OWNER Hawk Properties
MAILING ADDRESS 2171 W Williams Ave Pmb 280 Fallon, N
Fallon, NV 89406

ADDRESS AT WELL LOCATION 4394 Cardinal Dr
Fallon, NV 89406

2. LOCATION SW 1/4 NE 1/4 Sec. 21 T 19N R 28E Churchill County
PERMIT NO. Parcel No. 00828327 Subdivision Name Lot

3. WORK PERFORMED New Well	4. PROPOSED USE Domestic	5. WELL TYPE Rotary-mud
-------------------------------	-----------------------------	----------------------------

6. LITHOLOGIC LOG				
Material	Water Shows	From	To	Thickness
Sand		0	4	4
Brown Sand		4	18	14
Brown Clay		18	24	6
Brown Sand		24	43	19
Black Clay		43	56	13
Black Sand		56	68	12
Brown Clay		68	72	4
Brown Sand	X	72	82	10

8. WELL CONSTRUCTION			
Depth Drilled	82	Depth Cased	82 Feet
HOLE DIAMETER (BIT SIZE)			
	From	To	
12 Inches	0 Feet	50 Feet	
10 Inches	50 Feet	82 Feet	
Inches	Feet	Feet	

CASING SCHEDULE				
Size O.D. (inches)	Weight/FT (Pounds)	Wall Thickness	From (Feet)	To (Feet)
6.625	12.92	6.625	0	20
6	3.82	0.258	20	82

Perforations:
Type perforation Saw Cut
Size perforation 0.125
From 77 feet to 82 feet

Surface Seal: Yes No Seal Type: Concrete Grout
Depth of Seal 50
Placement Method: Pumped
Gravel Packed: Yes No
From 50 feet to 82 Feet

9. WATER LEVEL
Static Water Level 15 feet below land surface
Artesian Flow G.P.M. P.S.I.
Water temperature ° F Quality unknown

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

Name Parsons Drilling, Inc.
Contractor
Address 403 McLean Road
Fallon, NV 89407
Contractor
Nevada contractor's license number 29064
issued by the State Contractor's Board
Nevada driller's license number issued by the 1758
Division of Water Resources, the on-site driller
Signed Floyd Wright
By driller performing the actual drilling on site or contractor
Date 7/13/2005

RECEIVED
SEP 12 PM 2:08
STATE ENGINEERING OFFICE

Latitude _____
Longitude _____

Date started 6/14/2005
Date completed 6/14/2005

7. WELL TEST DATA

TEST METHOD			
Comments	GPM	Drawdown	Time (Hours)