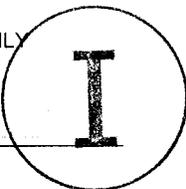


STATE OF NEVADA
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY
 Log No. **98481**
 Permit No. **φ45**
 Basin **φ45**



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. **52208**

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

1. OWNER **REX STENINGER**
 MAILING ADDRESS **229 PINE STREET**
ELKO, NV 89801

ADDRESS AT WELL LOCATION **HOG TOMMY ROAD - 1 MILE NORTH**
3399
 N/S R **57E** E **ELKO** County

2. LOCATION **NW 1/4 SW 1/4 Sec. 11 T 33N**
 PERMIT NO. **66892** Issued by Water Resources
006-520-050 Parcel No.

SPECIAL LAND
 Subdivision Name

3. WORK PERFORMED
 New Well
 Replace
 Recondition
 Deepen
 Abandon
 Other **TEST**

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

5. WELL TYPE
 Cable
 Air
 Rotary
 RVC
 Other **MUD**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
SOIL		0	2	2
FINE SAND & MINOR CLAY		2	30	28
CLAY		30	45	15
FINE SAND W/SOME CLAY	XXX	45	220	175
CLAY/VOLCANIC TUFF		220	615	395

WATER WAS COMING IN FROM 150 TO 200 - ALOT OF SAND COMING IN WITH WATER - THE SAND WAS EXTREMELY FINE, ALL CUTTINGS WOULD PASS THROUGH SEIVE (20 MESH)

THIS TEST HOLE WAS ABANDONED
 78 BAGS OF SUPER PLUG (50 lbs)
 10 BAGS OF CEMENT (94 lbs)

8. WELL CONSTRUCTION

Depth Drilled **615** Feet Depth Cased **N/A** Feet

HOLE DIAMETER (BIT SIZE)

From	To	Feet	Feet
9 7/8 Inches	0 Feet	38 Feet	
7 7/8 Inches	38 Feet	615 Feet	

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)

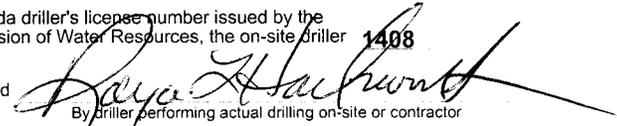
Perforations:
 Type perforation **N/A**
 Size perforation **N/A**

From	feet to	feet

Surface Seal: Yes No Seal Type:
 Depth of Seal **615** Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From **N/A** feet to **N/A** feet

9. WATER LEVEL
 Static water level **90** 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 **HACKWORTH DRILLING, INC** Contractor
 Address **P.O. BOX 850** Contractor
ELKO, NV 89803
 Nevada contractor's license number issued by the State Contractor's Board **020582**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1408**
 Signed 
 By driller performing actual drilling on-site or contractor
 Date **10/11/2004**

Date started **9/24/2004**, 19____
 Date completed **10/7/2004**, 19____

7. WELL TEST DATA

TEST METHOD:	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift G.P.M. _____	100	1 HR