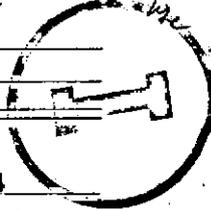


STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 98636
 Permit No. _____
 Basin 102



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. 28364

1. OWNER PAHRUMP UTILITY CO. INC ADDRESS AT WELL LOCATION KENSINGTON ST WELL # SW
 MAILING ADDRESS KENSINGTON ST WELL # 3W
PAHRUMP, NV

2. LOCATION SW 1/4 NE 1/4 Sec. 17 T 21S N/S R 54E E _____ NYE _____ County
 PERMIT NO. 45-171-64 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 | Thick-ness |
|------------|--------------|------|----|------------|
| SILT | | 0 | 3 | 3 |
| SILTY CLAY | | 3 | 11 | 8 |
| CALICHE | | 11 | 31 | 20 |
| CLAY | | 31 | 50 | 19 |
| CALICHE | | 50 | 60 | 10 |
| CLAY | | 60 | 68 | 8 |
| CALICHE | WB | 68 | 77 | 9 |
| CLAY | | 77 | 80 | 3 |

8. WELL CONSTRUCTION
 Depth Drilled 85 Feet Depth Cased 85 Feet

HOLE DIAMETER (BIT SIZE)
 From 6 Inches To 0 Feet 85 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

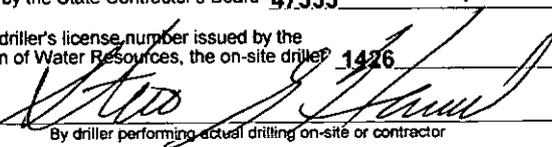
CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|-----------|
| <u>2</u> | <u>.565</u> | <u>.154</u> | <u>0</u> | <u>85</u> |

Perforations:
 Type perforation SCREEN
 Size perforation .020
 From 60 feet to 80 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 85 feet

9. WATER LEVEL
 Static water level 70 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 1476
 Signed 
 By driller performing actual drilling on-site or contractor
 Date 1/18/2006

Date started 1/9/2006 _____ 19
 Date completed 1/9/2006 _____ 19

7. WELL TEST DATA

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

DCNR/DWR
 RECEIVED

JAN 25 2006

LAS VEGAS OFFICE