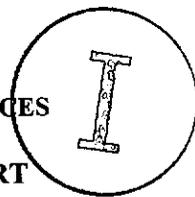


STATE OF NEVADA
DIVISION OF WATER RESOURCES



OFFICE USE ONLY

Log No. 99136
Permit No. _____
Basin 10

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. 56514

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

ADDRESS AT WELL LOCATION 4773 Hawk Dr.
Fallon, NV 89406

2. LOCATION SE 1/4 NE 1/4 Sec. 21 T 19N R 28E Churchill County
PERMIT NO. Parcel No. 008-284-21 Subdivision Name Lot

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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Brown Clay		0	18	18
Brown Sand		18	23	5
Gray Clay		23	26	3
Black Clay		26	31	5
Black Sand		31	64	33
Brown Clay		64	73	9
Brown Sand	X	73	82	9

8. WELL CONSTRUCTION

Depth Drilled	82	Depth Cased	82	Feet
HOLE DIAMETER (BIT SIZE)				
		From	To	
12.3 Inches		0 Feet	50 Feet	
10 Inches		50 Feet	82 Feet	
Inches		Feet	Feet	

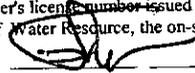
CASING SCHEDULE

Size O.D. (inches)	Weight/Ft. (Pounds)	Wall Thickness	From (Feet)	To (Feet)
6.625	12.92	0.188	0	20
6	3.85	0.258	20	82

Perforations:
Type perforation Saw Cut
Size perforation 0.125
From 78 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 16 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
Nevada contractor's license number 29064 issued by the State Contractor's Board
Nevada driller's license number issued by the Division of Water Resource, the on-site driller 1758
Signed 
By driller performing the actual drilling on site or contractor
Date 10/27/2005

RECEIVED
2005 DEC 16 PM 2:26
STATE ENGINEERS OFFICE

Latitude _____
Longitude _____

Date started 10/22/2005
Date completed 10/22/2005

7. WELL TEST DATA

TEST METHOD	GPM	Drawdown	Time (Hours)
Comments			