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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. 56778

1. OWNER Steven Beck ADDRESS AT WELL LOCATION 2095 E 9th
 MAILING ADDRESS _____

2. LOCATION NW 1/4 NW 1/4 Sec 20 T 17 N/S R 25 E 1400 County _____
 PERMIT NO. 17-461-10 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
<u>Sand</u>		<u>0</u>	<u>15</u>	<u>15</u>
<u>Gravel & clay</u>		<u>15</u>	<u>70</u>	<u>55</u>
<u>clay</u>		<u>70</u>	<u>100</u>	<u>30</u>
<u>Gravel & clay</u>		<u>100</u>	<u>120</u>	<u>20</u>
<u>Black flinted Rock</u>		<u>120</u>	<u>140</u>	<u>20</u>
<u>Gravel</u>		<u>140</u>	<u>198</u>	<u>58</u>

8. WELL CONSTRUCTION
 Depth Drilled 198 Feet Depth Cased 198 Feet
 HOLE DIAMETER (BIT SIZE)
 From 11 Inches To 0 Feet 198 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>		<u>.188</u>	<u>+1</u>	<u>18</u>
<u>6 5/8</u>		<u>30/2 21</u>	<u>18</u>	<u>198</u>

Perforations:
 Type perforation Grinder cut
 Size perforation 1/8 inch
 From 178 feet to 198 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 5.5
 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 5.5 feet to 198 feet

9. WATER LEVEL
 Static water level 35 feet below land surface
 Artesian flow N/A G.P.M. 25 P.S.I.
 Water temperature Cold °F Quality Clear

Date started 3-28, 2006
 Date completed 3-29, 2006

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>25</u>		<u>1 hr</u>

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

Name BLAIN DRILLING & PUMP CO. INC.
 Address PO Box 1255 Carson City, NV 89702

Nevada contractor's license number issued by the State Contractor's Board _____
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2134-71
 Signed [Signature] By driller performing actual drilling on site or contractor
 Date 3-21-06