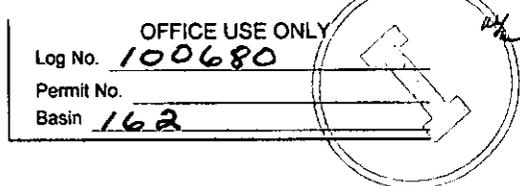


STATE OF NEVADA  
 DIVISION OF WATER RESOURCES  
**WELL DRILLER'S REPORT**



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. **30378**

1. OWNER **LEE SPENCER** ADDRESS AT WELL LOCATION **2830 N THUNDER CLOUD WAY**  
 MAILING ADDRESS **2830 N THUNDER CLOUD WAY**  
**PAHRUMP, NV**

2. LOCATION **NW** 1/4 **NE** 1/4 Sec. **31** T **19S** N/S R **52E** E **NYE** County  
 PERMIT NO. **29-541-22** **HAFEN ROS**  
Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED  New Well  Replce  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
CLAY		0	81	81
CALICHE	WB	81	89	8
CLAY		89	117	28
CALICHE	WB	117	129	12
CLAY		129	162	33
CALICHE	WB	162	184	22
CLAY		184	200	16

DCNR/DWR  
RECEIVED  
SEP 06 2006  
LAS VEGAS OFFICE

8. WELL CONSTRUCTION  
 Depth Drilled **200** Feet Depth Cased **200** Feet

HOLE DIAMETER (BIT SIZE)  
 From **10** Inches To **0** Feet  
 From **0** Feet To **200** Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6	3.63	.250	0	200

Perforations:  
 Type perforation **SAWCUT**  
 Size perforation **1/8 X 3**

From <b>140</b> feet to <b>200</b> feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Surface Seal:  Yes  No  
 Depth of Seal **50**  
 Placement Method:  Pumped  Poured  
 Seal Type:  Neat Cement  Cement Grout  Concrete Grout

Gravel Packed:  Yes  No  
 From **50** feet to **200** feet

9. WATER LEVEL  
 Static water level **66** 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

Date started **8/30/2006**, 19\_\_\_\_  
 Date completed **8/30/2006**, 19\_\_\_\_

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 type="checkbox"/> Air Lift			

Address **1220 E MANSE RD**  
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 **1642**

Signed *[Signature]*  
 By driller performing actual drilling on-site or contractor

Date **8/31/2006**