

COPIES TO
 - DIVISION OF WATER RESOURCES
 - CLIENT'S COPY
 - WELL DRILLER'S COPY

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

OFFICE USE ONLY
 Log No. 101012
 Permit No. _____
 Basin 162

PRINT OR TYPE ONLY

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 30252

1. OWNER Jon & Rebecca Hendrickson
 MAILING ADDRESS _____
 ADDRESS AT WELL LOCATION 1141 W. Gee St.

2. LOCATION NE 1/4 NE 1/4 Sec 32 T 19S N R 53 E Nye County
 PERMIT NO. _____ 41-572-05 Golden Springs Ranch Ut:7, Lot: 69

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 |
|--------------------------|--------------|------|-----|------------|
| Surface | | 0 | 4 | 4 |
| Brown Clay/Gran. Caliche | | 4 | 12 | 8 |
| Brown Clay | | 12 | 25 | 13 |
| Brown Clay/Caliche | | 25 | 57 | 32 |
| Brown Clay | X | 57 | 110 | 53 |
| Brown Clay/Caliche | X | 110 | 154 | 44 |
| Brown Clay | X | 154 | 180 | 26 |

8. WELL CONSTRUCTION

Depth Drilled 180 Feet Depth Cased 180 Feet

HOLE DIAMETER (BIT SIZE)

| From | To |
|-----------|-----------------|
| 10 Inches | 0 Feet 180 Feet |
| Inches | Feet Feet |
| Inches | Feet Feet |

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|-----------|
| 6 5/8 | 3.92 | .28 | 0 | 180 |

Perforations:
 Type perforation Saw Cut
 Size perforation 1/4" width 8" long
 From 140 feet to 180 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 180 feet

9. WATER LEVEL
 Static water level 61 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started October 6, 20 06
 Date completed October 6, 20 06

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name JIM PIKE WELL DRILLING, LLC.
 (CONTRACTOR)

7. WELL TEST DATE

TEST METHOD: Bailer Pump Air Lift

| G.P.M. | Draw Down (Feet Below Static) | Time (Hours) |
|--------|-------------------------------|--------------|
| 20 | 4 | 1/4 |

Address P.O. BOX 56
 (CONTRACTOR)
PAHRUMP, NV. 89041
 Nevada contractor's license number issued by the State Contractor's Board 17563A
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1324
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date October 9, 2006