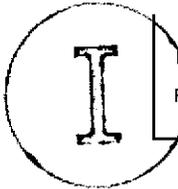


STATE OF NEVADA
DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT



OFFICE USE ONLY
Log No. 10834
Permit No. _____
Basin 087

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

1. OWNER SFPP, L.P. ADDRESS AT WELL LOCATION 333 Galletti Way Washoe
MAILING ADDRESS 1100 Town & County Rd. Orange Ca. Reno Nevada 92868 Subdivision Name: _____ County: _____
NOTICE OF INTENT NO. 62150

2. LOCATION NE 1/4 NW 1/4 Sec 7 T 19 N R 20 E Latitude N 39.53396 UTM E _____ NAD 27
PERMIT/WAIVER No. NDWP-D-000762 SPRB RT/3222078 Longitude W 119.78076 N _____ NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

3. WORKED PERFORMED New Well Replace Recondition Deepen Other
4. PROPOSED USE (Extraction) Domestic Irrigation Test Stock Monitor
5. WELL TYPE Cable Rotary RVC Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>Fill</u>		<u>0</u>	<u>10</u>	<u>10</u>
<u>Boulders, Granite</u>		<u>10</u>	<u>52</u>	<u>42</u>
<u>Sand & Gravel</u>		<u>52</u>	<u>65</u>	<u>13</u>
	<u>50</u>			

79.534°N NAD 83 00
119.780°W

9. WELL CONSTRUCTION

Depth Drilled 65 Feet Depth Cased 65 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
<u>12</u> Inches	<u>0</u> Feet	<u>65</u> Feet
_____ Inches	_____ Feet	_____ Feet
_____ Inches	_____ Feet	_____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4</u>		<u>sch 40 PUL</u>	<u>0</u>	<u>65</u>
<u>2</u>		<u>sch 40 PUL</u>	<u>0</u>	<u>25</u>

Perforations:

Type of perforation mill slot
Size of perforation 4"-.010, 2"-.020

From 4"-35' feet to 65' feet
From _____ feet to _____ feet
From 2"-10' feet to 25' feet
From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement 0 to 8 Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: Yes No 33 to 65 Pumped Poured
Type: #3 9 to 20

Bentonite Chips: Yes No 8 to 9 Pumped Poured
Type: medium chips 28'-33'

Date started: 7-8 20 09
Date completed: 7-17 20 09

7. Water Level
Static water level: 50 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: cool °F
Quality: Jet Fuel

8. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>None</u>			

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name WDL Exploration & Wells Contractor
Address P.O. Box 141 Contractor
Zamora Ca. 95698
Nevada contractor's license number _____
issued by the State Contractor's Board 12852
Nevada driller's license number issued by the Division of Water Resources the on-site driller _____
Signed Randy Currier 2244
By driller performing actual drilling on-site or contractor
Date 7/29/09

(Rev. 05-08)

USE ADDITIONAL SHEETS IF NECESSARY