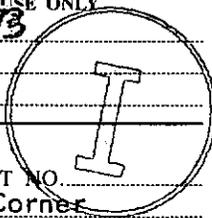


OFFICE USE ONLY
 Log No. 38073
 Permit No. 87
 Basin 87



PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

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. _____

1. OWNER PDQ Stores Inc. ADDRESS AT WELL LOCATION Winners Corner
 MAILING ADDRESS 660 City West Parkway 1365 Baring Boulevard
Eden Prairie, Minnesota 55344 Sparks, Nevada 89431

2. LOCATION SW 1/4 NE 1/4 Sec. 34 T. 20 (N/S R. 20 E. Washoe County

PERMIT NO. M/O-422A 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. MW-3 LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>ASPHALTIC CONCRETE and AGGREGATE BASE</u>	<u>No</u>	<u>0.0</u>	<u>0.5</u>	<u>0.5</u>
<u>BLACK to BROWN SILTY SAND</u>	<u>No</u>	<u>0.5</u>	<u>7.5</u>	<u>7.0</u>
<u>BROWN CLAYEY SAND with CLAY LENSES</u>	<u>Yes</u>	<u>7.5</u>	<u>24.0</u>	<u>16.0</u>

8. WELL CONSTRUCTION
 Depth Drilled 24.0 Feet Depth Cased 24.0 Feet

HOLE DIAMETER (BIT SIZE)
 From 12.0 Inches To 0.0 Feet 24.0 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4.5</u>	<u>1.5</u>	<u>Schedule 40</u>	<u>0.0</u>	<u>24.0</u>

Perforations:
 Type perforation Slots
 Size perforation 0.02 and 0.01

From 9.0 feet to 19.0 feet
 From 19.0 feet to 24.0 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 6.5 _____ Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From 8.0 feet to 24.0 feet

9. WATER LEVEL
 Static water level 13.0 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started January 8, 1992
 Date completed January 8, 1992

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

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

Name Mark E. Debusk Contractor
 Address 520 Edison Way Contractor
Reno, Nevada 89502

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 M-1768

Signed Mark E. DeBusk
 By driller performing actual drilling on site or contractor
 Date 1/24/92