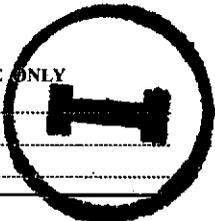


OFFICE USE ONLY
 Log No. **53791**
 Permit No. _____
 Basin **230**



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. **17955**

1. OWNER **DON SCHAUER** ADDRESS AT WELL LOCATION **691 W. BETTLES**
 MAILING ADDRESS _____
 2. LOCATION **N.W. 1/4 SE 1/4 Sec. 12 T. 17 S. N/S R. 48 E. NYE** County
 PERMIT NO. **19-121-31** 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	Thick-ness
SAND		0	4	4
CALICHE		4	15	11
SAND		15	21	6
CALICHE		21	70	49
FRACTURED LIMESTONE	W.B.	70	120	50

8. WELL CONSTRUCTION
 Depth Drilled **120** Feet Depth Cased **120** Feet
 HOLE DIAMETER (BIT SIZE)
 From **12 1/4** Inches To **120** Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8 5/8	16.94	.188	0	120

Perforations:
 Type perforation **FACTORY SAW CUT**
 Size perforation **1/8" x 3"**
 From **100** feet to **120** feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal **50 ft.** Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From **50** feet to **120** feet

9. WATER LEVEL
 Static water level **60** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started **6-18** 19**96**
 Date completed **20 6-20** 19**96**

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			

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** Contractor
 Address **P.O. Box 4220** Contractor
Pahrump, NV. 89041
 Nevada contractor's license number issued by the State Contractor's Board **30880**
 Nevada driller's license number issued by the Division of Water Resources the on-site driller **1426**
 Signed **[Signature]**
 By driller performing actual drilling on site or contractor
 Date **6-25-96**