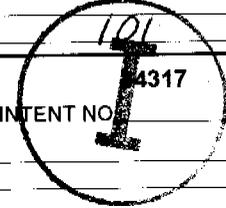


STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 06134
 Permit No. _____
 Basin _____



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. _____

1. OWNER **BILL DAVIG** ADDRESS AT WELL LOCATION **500 ROBERSON**
 MAILING ADDRESS **4375 SHECKLER FALLON, NV 89406**

2. LOCATION **NW 1/4 NW 1/4 Sec. 29 T 26 19 N/S R 15 28 E CHURCHILL** County
 PERMIT NO. _____ Issued by Water Resources Parcel No. **008-572-07** 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
BROWN SAND		0	15	15
BROWN CLAY		15	18	3
BROWN SAND		18	25	7
GREY SAND		25	30	5
BROWN CLAY		30	34	4
BROWN SAND	X	34	46	12

8. WELL CONSTRUCTION
 Depth Drilled **46** Feet Depth Cased **46** Feet

HOLE DIAMETER (BIT SIZE)
 From To
10 3/4 inches **0** Feet **25** Feet
6 1/8 inches **25** Feet **46** Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.9	.188	+1	46

Perforations: Type perforation **MACHINE CUT**
 Size perforation **.080**

From **40** feet to **45** feet
 From _____ feet to _____ feet

Surface Seal: Yes No
 Depth of Seal **25 per Telcom**
 Placement Method: Pumped w/Driller Poured

Seal Type: Neat Cement Cement Grout Concrete Grout

Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level **6.6** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **COOL** °F Quality **UNTESTED**

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name **Welsco Drilling Corp.** Contractor
 Address **P. O. BOX 888** Contractor
FALLON, NV 89407
 Nevada contractor's license number issued by the State Contractor's Board **11752**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1996**
 Signed *[Signature]*
 By driller performing actual drilling on-site or contractor
 Date **8-7-96**

Date started **7/30/96** 19____
 Date completed **7/30/96** 19____

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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