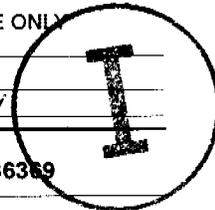


STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 67944
 Permit No. _____
 Basin 101



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. 36369

1. OWNER KOPAS KONSTRUCTION ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 5105 SANDALWOOD 229 LEWIS LANE
FALLON, NV 89406

2. LOCATION SW 1/4 NE 1/4 Sec. 28 T 19N N/S R 28E E CHURCHILL County
 PERMIT NO. _____ Parcel No. 008-493-42 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	20	20
BOWN CLAY		20	23	3
BROWN SAND		23	40	17
GREY SAND		40	80	40
BLACK SILT/CLAY		80	100	20
GREY SAND		100	130	30
BROWN CLAY		130	138	8
BROWN SAND	X	138	160	22

8. WELL CONSTRUCTION
 Depth Drilled 160 Feet Depth Cased 160 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
<u>10 3/4</u> Inches	<u>0</u> Feet	<u>50</u> Feet
<u>6 1/8</u> Inches	<u>50</u> Feet	<u>160</u> Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>12.9</u>	<u>.188</u>	<u>+1</u>	<u>160</u>

Perforations:
 Type perforation MACHINE SLOT
 Size perforation .080

From	feet to	feet
<u>153</u>	<u>158</u>	
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Surface Seal: Yes No Seal Type:
 Depth of Seal 50 Neat Cement Revised
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 11.7 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature COOL °F Quality UNTESTED

Date started 4/8/97, 19____
 Date completed 4/8/97, 19____

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>25</u>		<u>1 hr.</u>

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 305 E. WILLIAMS AVE. 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 4-29-97