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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. 17458

1. OWNER SERPS FAMILY LIMITED PARTNERSHIP ADDRESS AT WELL LOCATION 4430 E. KISHA AVE.
 MAILING ADDRESS _____

2. LOCATION NE 1/4 NW 1/4 Sec. 29 T. 21-S N/S R. 54 E. NYE County NYE
 PERMIT NO. 45-322-30 GREEN SADDLE RANCH
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 |
|------------------------|--------------|------|-----|------------|
| Surface | | 0 | 4 | 4 |
| Sandy Loam | | 4 | 10 | 6 |
| Brown Clay | | 10 | 38 | 28 |
| Brown Clay/Gravel | | 38 | 71 | 33 |
| Brown Clay | X | 71 | 93 | 22 |
| Brown Clay/Caliche | | 93 | 115 | 22 |
| Brown Clay | | 115 | 130 | 15 |
| Brown Clay/Cal./Gravel | X | 130 | 160 | 30 |

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

HOLE DIAMETER (BIT SIZE)
 From To
12 Inches 0 Feet 160 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 | 160 |

Perforations: Torch Cut
 Type perforation _____
 Size perforation 1/4" width 8" long
 From 120 feet to 160 feet
 From _____ feet to _____ feet

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

Gravel Packed: Yes No
 From 50 feet to 160 feet

9. WATER LEVEL
 Static water level 68 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started JANUARY 22, 1999
 Date completed JANUARY 22, 1999

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

| G.P.M. | Draw Down (Feet Below Static) | Time (Hours) |
|--------|-------------------------------|--------------|
| 20 | 4 | 1/4 |

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

Name JIM PIKE WELL DRILLING, LLC Contractor
 Address P.O. BOX 56 PAHRUMP, NV. 89041 Contractor

Nevada contractor's license number 17563A issued by the State Contractor's Board
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller: 1812

Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date JANUARY 29, 1999

