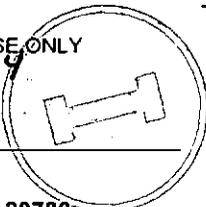


STATE OF NEVADA
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY
 Log No. **81719**
 Permit No. _____
 Basin **162**



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. 20780

1. OWNER **Sundance Homes**
 MAILING ADDRESS **2230 E. Deadwood**
Pahrump, NV 89048

ADDRESS AT WELL LOCATION
2230 E. Deadwood

2. LOCATION **SE 1/4 NW 1/4 Sec. 36 T 20S**
 PERMIT NO. **41-052-03**
 Issued by Water Resources Parcel No. _____

N/S R **53E** E **Nye** County
Calvada Valley 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 silt		0	12	12
brown caleche		12	18	6
See next line		18	27	9
brown loam with caleche strings				
brown loam		27	46	19
brown caleche		46	53	7
See next line	x	53	65	12
brown loam with caleche strings				
See next line	x	65	105	40
brown clay with green caleche				
See next line	x	105	160	55
brown clay with caleche strings				

8. WELL CONSTRUCTION

Depth Drilled **160** Feet Depth Cased **160+1** Feet

HOLE DIAMETER (BIT SIZE)

	From	To		
11 Inches	0 Feet	160 Feet		

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	3.7	.280	0	160

Perforations:

Type perforation **sawcut**
 Size perforation **.188**
 From **140** feet to **160** feet
 From _____ feet to _____ feet

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

Gravel Packed: Yes No
 From **50** feet to **160** feet

9. WATER LEVEL

Static water level **65** feet below land surface
 Artesian flow _____ G.P.M. P.S.I.
 Water temperature **cool** °F Quality **good**

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name **Strickland Construction Co., Inc.** Contractor
 Address **2301 Winery Road, Suite 2** Contractor
Pahrump, NV 89048

Nevada contractor's license number issued by the State Contractor's Board **40277**

Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2086**

Signed _____
 By driller performing actual drilling on-site or contractor
 Date **12-7-00**



Date started **12/4/00** _____ 19____
 Date completed **12/4/00** _____ 19____

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift
 Draw Down (Feet Below Static) Time (Hours)
 G.P.M. _____

