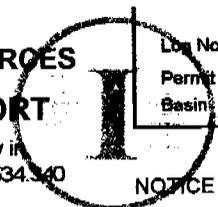


STATE OF NEVADA  
 DIVISION OF WATER RESOURCES  
**WELL DRILLER'S REPORT**



OFFICE USE ONLY  
 Log No. 89474  
 Permit No. \_\_\_\_\_  
 Basin 073-A

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. **48975**

OWNER LAHONTAN HOMES/ NEVALASCA  
 MAILING ADDRESS 4700 RENO HWY  
FALLON, NV 89406

ADDRESS AT WELL LOCATION 22205 TOPAZ LAKE DRIVE

2. LOCATION SW 1/4 NE 1/4 Sec. 21 T 30 N/S R 33 E PERSHING County  
 PERMIT NO. \_\_\_\_\_ Issued by Water Resources 10-433-05 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	Thickness
TOP SOIL		0	1	1
BROWN CLAY		1	40	39
BROWN SILT		40	44	4
BROWN CLAY		44	65	21
BROWN SILT		65	68	3
BROWN CLAY-SILT		68	140	72
RED SILTY CLAY		140	160	20
BROWN CLAY		160	170	10
M.C. GRAVELS	X	170	180	10
SEALED WITH AQUA GUARD				

8. WELL CONSTRUCTION  
 Depth Drilled 180 Feet Depth Cased 180 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 0 Feet To 50 Feet  
10 3/4 Inches  
 From 50 Feet To 180 Feet  
6 1/8 Inches

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>+2</u>	<u>180</u>

Perforations:  
 Type perforation MACHINE SLOT  
 Size perforation .080  
 From 172 feet to 178 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No  
 Depth of Seal 50  
 Placement Method:  Pumped  Poured  
 Seal Type:  Neat Cement  Cement Grout  Concrete Grout  
 Gravel Packed:  Yes  No  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

9. WATER LEVEL  
 Static water level 2' 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 CORP. Contractor  
 Address P. O. BOX 888 Contractor

Date started 3/26/2003 19  
 Date completed 3/28/2003 19

7. WELL TEST DATA

TEST METHOD:	TEST METHOD:	
	G.P.M.	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>20</u>	<u>1 HR</u>

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 2199  
 Signed [Signature] By driller performing actual drilling on-site or contractor  
 Date 4/18/2003