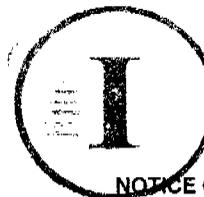


STATE OF NEVADA
DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT



office use only
Log No. 89970
Permit No. _____
Basin 086

NOTICE OF INTENT NO 50757

OWNER
MAILING ADDRESS

George & Carol Stankovich
5735 Ursula Ct.
Sun Valley, NV 89433

ADDRESS AT WELL LOCATION

5735 Ursula Ct.

2. Location SW 1/4 NW 1/4 Sec 13 T 20N R 19E Washoe County
PERMIT NO. PARCEL NO. 088-220-11 SUBDIVISION NAME

| 3. WORK PERFORMED | | | 4. PROPOSED USE | | | 5. WELL TYPE | | |
|--|---------|-------------|--|------------|-------|---|--|-----|
| New Well | Replace | Recondition | <input checked="" type="checkbox"/> Domestic | Irrigation | Test | Cable | <input checked="" type="checkbox"/> Rotary | RVC |
| <input checked="" type="checkbox"/> Deepen | Abandon | Other | Municipal/Industrial | Monitor | Stock | <input checked="" type="checkbox"/> Air | Other | Mud |

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thickness |
|--------------|--------------|------|-----|-----------|
| Blue granite | | 125 | 150 | 25 |
| D.G. | | 150 | 178 | 28 |

8. WELL CONSTRUCTION

| Depth Drilled | | Depth Cased | |
|---------------|--|-------------|--|
| 178 feet | | 178 feet | |

HOLE DIAMETER (BIT SIZE)

| | From | To |
|-------------|----------|----------|
| 61/8 inches | 125 feet | 178 feet |
| inches | feet | feet |
| inches | feet | feet |

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|-----------|
| 5 | 6.96 | 188 | 98 | 178 |

Perforations:

| Type Perforation | Factory |
|---------------------------|-----------|
| Size perforation | 3/32 x 3" |
| From 138 feet to 178 feet | |
| From feet to feet | |
| From feet to feet | |
| From feet to feet | |
| From feet to feet | |

Surface Seal YES No Seal Type:
Depth of Seal 50 feet Neat Cement
Pumped Cement Grout
Poured Concrete Grout

Gravel Packed: Yes No
From feet to feet

9. WATER LEVEL

| | |
|--------------------|----------------------------|
| Static water level | 25 feet below land surface |
| Artesian flow | 0 GPM 0 P.S.I. |
| Water Temperature | cold Degrees F Quality |

Date started 5-10 -02
Date completed 5-13 -02

7. WELL TEST DATA

| TEST METHOD: | Bailer | Pump | x | Air Lift |
|--------------|-------------------------------|--------------|---|----------|
| G.P.M. | Draw Down (Feet Below Static) | Time (hours) | | |
| 30+ | | 2 | | |

10. DRILLER'S CERTIFICATION

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

Name McKay Drilling, Inc.
2290 Pioneer Drive
Reno, NV 89509

NV Contractors No. 14170
NV Driller's Lic (on site) 1878

Signed
By driller performing actual drilling on site or contractor
Date 5-28 -02

ENTER
 DATE: 08-10-02
 TIME: 10:00 AM
 BY: [Signature]