

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

Log No. 90387
 Permit No. _____
 Basin. 107

PRINT OR TYPE ONLY
 NOT WRITE ON BACK

1. OWNER Shaw Bridge Unlimited ADDRESS AT WELL LOCATION 62 GARNES Cir Smith Valley
 MAILING ADDRESS _____

2. LOCATION NE 1/4 NE 1/4 Sec 28 T 11 N/S R 24 E h702 County _____
 PERMIT NO. N/A Issued by Water Resources 09-121-04 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
<u>sandy gravel</u>		<u>0</u>	<u>200</u>	<u>200</u>
<u>clay</u>		<u>200</u>	<u>260</u>	<u>60</u>
<u>sand + gravel</u>	<u>+</u>	<u>260</u>	<u>321</u>	<u>61</u>

8. WELL CONSTRUCTION
 Depth Drilled 320 Feet Depth Cased 321 Feet
 HOLE DIAMETER (BIT SIZE)
 From _____ To _____
 Inches _____ Feet _____ Feet
10 5/8 Inches 0 Feet 321 Feet
 Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 7/8</u>	<u>SDR 21</u>	<u>7/16</u>	<u>20</u>	<u>300</u>
<u>6 7/8</u>	<u>13 lbs</u>	<u>188</u>	<u>+1</u>	<u>20</u>

Perforations:
 Type perforation _____
 Size perforation _____
 From 301 feet to 321 feet
 From _____ feet to _____ feet
 From 260 feet to 381 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type: _____
 Depth of Seal 50 ft Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 50 feet to 321 feet

9. WATER LEVEL
 Static water level 116 feet below land surface
 Artesian flow NA G.P.M. _____ P.S.I. _____
 Water temperature 60 °F Quality LCAR

Date started 6-2-03, 20____
 Date completed 6-6-03, 20____

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>20+</u>	<u>200</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 Leach Drilling Inc.
 Address P.O. Box 599 Silver Springs, NV 89429
 Nevada contractor's license number issued by the State Contractor's Board 0031841
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1878
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 6-6-03