

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. 26251

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

1. OWNER Michael Berlesley
MAILING ADDRESS 9524 N. Camelback Suite 130 Phoenix, AZ
ADDRESS AT WELL LOCATION 298 S. DETROIT BLVD LAS VEGAS, NV 89107
2. LOCATION NE 1/4 NE 1/4 Sec. 36 T. 20 N. 8 R. 10 E. Clark
PERMIT NO. 138-36-5160AS Parcel No. 138-36-5160AS Subdivision Name _____

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other _____

4. PROPOSED USE
 Domestic Municipal/Industrial
 Irrigation Test Monitor Stock

5. WELL TYPE
 Cable Rotary RVC
 Air Other HSA

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thick- ness |
|---------------------------|--------------|-------------|-------------|----------------|
| <u>TYPE II FILL</u> | | <u>00</u> | <u>20</u> | <u>20</u> |
| <u>SAND S/H</u> | | <u>2.0</u> | <u>4.0</u> | <u>2.0</u> |
| <u>CLAY</u> | | <u>4.0</u> | <u>6.5</u> | <u>2.5</u> |
| <u>COMPACTED MATERIAL</u> | | <u>6.5</u> | <u>11.0</u> | <u>4.5</u> |
| <u>S.H.V SAND</u> | | <u>11.0</u> | <u>15.0</u> | <u>4.0</u> |
| <u>SHAD & GRAVEL</u> | | <u>15.0</u> | <u>25.0</u> | <u>10.0</u> |

8. WELL CONSTRUCTION
Depth Drilled 25 Feet
HOLE DIAMETER (BIT SIZE)
From 1 1/2 Inches To 25.0 Feet
Inches: 00 Feet
Inches: _____ Feet

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|-------------|
| <u>4.50</u> | | <u>54.40</u> | <u>0.0</u> | <u>10.0</u> |

Perforations:
Type perforation MACHINE SLOTTED
Size perforation 0.20
From 25.0 feet to 10.0 feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Surface Seal: Yes No
Depth of Seal _____
Placement Method: Pumped Neat Cement
 Poured Cement Grout
 Concrete Grout

Gravel Packed: Yes No
From 25 feet to 8.0 feet

9. WATER LEVEL
Static water level 14.0 feet below land surface
Artesian flow _____ G.P.M. P.S.I.
Water temperature _____ °F Quality _____

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name EAGLE DRILLING
Address 7150 PLACID ST LAS VEGAS, NV 89119
Contractor _____
Nevada contractor's license number 51766
Nevada driller's license number issued by the Division of Water Resources, the on-site driller. 2202
Signed [Signature]
Date 2-20-04
By driller performing actual drilling on site or contractor

Date started 2-17 2004
Date completed 2-19 2004

7. WELL TEST DATA
TEST METHOD: Bailor Pump Air Lift
G.P.M. (Feet Below Static) _____ Time (Hours) _____