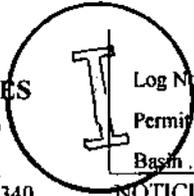


COPIES TO
 - DIVISION OF WATER RESOURCES
 - CLIENT'S COPY
 - WELL DRILLER'S COPY

STATE OF NEVADA
 DIVISION OF WATER RESOURCES



OFFICE USE ONLY

Log No. 95467

Permit No. _____

Basin 103

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. 48676

PRINT OR TYPE ONLY

1. OWNER MARK KAMINSKY
 MAILING ADDRESS PO BOX 21668
CARSON CITY, NV 89721
 ADDRESS AT WELL LOCATION 5524 SIERRA VISTA LN.
CARSON CITY
NV, 89701

2. LOCATION SW 1/4 SE 1/4 Sec 35 T 15 N R 20 E CARSON County
 PERMIT NO. 010-121-25

Issued by Water Resources _____ 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
SAND CLAY		0	10	10
SAND BROWN CLAY AND VOLCANIC COBBLES		10	220	210
BROWN CLAY, SAND VOLCANIC ROCK SAND WITH SOME CLAY		210	230	20
BROWN CLAY SAND		230	320	90
BROWN CLAY SAND		320	345	15
SMALL GRAVEL SAND		345	360	15

8. WELL CONSTRUCTION
 Depth Drilled 360 Feet Depth Cased 360 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 5/8 Inches To 0 Feet 360 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8"		.188	+2	240
			280	300
			320	340

Perforations:
 Type perforation MILL SLOT
 Size perforation 3/32"
 From 340 feet to 360 feet
 From 300 feet to 320 feet
 From 240 feet to 260 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 50 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 50 feet to 360 feet

9. WATER LEVEL
 Static water level 187 feet below land surface
 Artesian flow NO G.P.M. _____ P.S.I.
 Water temperature COLD °F Quality _____

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Date started 09/03, 20 03
 Date completed 09/05, 20 03

7. WELL TEST DATE

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift			
AIR LIFT	<u>20</u>	<u>320</u>	<u>3 HOURS</u>

Name NEVADA PUMP & DRILLING (CONTRACTOR)
 Address PO BOX 2227 (CONTRACTOR)
DAYTON, NV 89403
 Nevada contractor's license number issued by the State Contractor's Board 046357
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1790
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 11/15/03

RECEIVED
 04 OCT -4 PM 12:12
 STATE ENGINEERS OFFICE