

#2

WHITE-DIVISION OF WATER RESOURCES
CANARY-CLIENT'S COPY
PINK-WELL DRILLER'S COPY

STATE OF NEVADA
DIVISION OF WATER RESOURCES

OFFICE USE ONLY

Log No. 97063
Permit No. _____
Basin 101

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

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. 55779

1. OWNER Ken Bear Hunt, JK Builders ADDRESS AT WELL LOCATION 1725 Heidi St
Mailing Address Fallon NV

2. LOCATION NW 1/4 NW 1/4 Sec. 20 T. 19 N/S R. 28 E. Churchill County
PERMIT NO. 008-175-02 08-173-90-1 Shyridge Estates
Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED: New Well, Replace, Recondition, Deepen, Abandon, Other
4. PROPOSED USE: Domestic, Municipal/Industrial, Irrigation, Monitor, Stock, Test, Other
5. WELL TYPE: Cable, Rotary, RVC, Air, Other

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thickness |
|--------------|--------------|------|----|-----------|
| Sand & clay | | 0 | 20 | |
| Clay | | 20 | 40 | |
| sand | | 40 | 50 | |
| small gravel | | 50 | 70 | |
| Black clay | | 70 | 74 | |

8. WELL CONSTRUCTION
Depth Drilled 74 Feet Depth Cased 74 Feet
HOLE DIAMETER (BIT SIZE)
From To
Inches Feet Feet
10 5/8 Inches 0 Feet 74 Feet
Inches Feet Feet

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|-----------|
| 6 5/8 | 13 | 1/8 | 15 | 15 |
| 6 1/2 | | 3/8 | 15 | 74 |

Perforations:
Type perforation Sand cut
Size perforation 5/16
From feet to feet
From feet to feet
From 55 feet to 60 feet
From feet to feet
From feet to feet

Surface Seal: Yes No Seal Type: Neat Cement, Cement Grout, Concrete Grout
Depth of Seal 50
Placement Method: Pumped, Poured
Gravel Packed: Yes No
From 50 feet to 74 feet

9. WATER LEVEL
Static water level 28 feet below land surface
Artesian flow NA G.P.M. WA P.S.I.
Water temperature 60.0 °F Quality Clear

Date started 5-26-05, 20
Date completed 5-26-05, 20

7. WELL TEST DATA

| TEST METHOD: | Bailer | Pump | Air Lift |
|--------------|-------------------------------|--------------|----------|
| G.P.M. | Draw Down (Feet Below Static) | Time (Hours) | |
| 207 | 40 | 1 1/2 hrs | |

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 Contractor
Address Bx 597 Silver Springs 2 NV 89429 Contractor
Nevada contractor's license number issued by the State Contractor's Board
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 5-26-05

RECEIVED
05 JUN 23 AM 11:18
STATE ENGINEERS OFFICE