

PRINT OR TYPE ONLY
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WELL DRILLER'S REPORT

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

1. OWNER **JOHN BRUSSEL** ADDRESS AT WELL LOCATION **2870 W JAYBIRD ST**
 MAILING ADDRESS **2870 W JAYBIRD ST**
PAHRUMP, NV

2. LOCATION **SW** 1/4 **SW** 1/4 Sec. **30** T **20S** N/S R **53** E **NYE** County
 PERMIT NO. _____ Parcel No. **45-533-21** Subdivision Name **GOLDEN SPRING RANCH #4**
Issued by Water Resources

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 | Thickness |
|----------|--------------|------|-----|-----------|
| CLAY | | 0 | 98 | 98 |
| CALICHE | WB | 98 | 101 | 3 |
| CLAY | | 101 | 132 | 31 |
| CALICHE | WB | 132 | 146 | 14 |
| CLAY | | 146 | 166 | 20 |
| CALICHE | WB | 166 | 174 | 8 |
| CLAY | | 174 | 200 | 26 |

8. WELL CONSTRUCTION
 Depth Drilled **200** Feet Depth Cased **200** Feet

HOLE DIAMETER (BIT SIZE)
 From **10.25** Inches To **0** Feet
 From **0** Feet To **200** Feet
 From _____ Inches To _____ Feet
 From _____ Inches To _____ Feet

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|-----------|
| 6 | 3.63 | .250 | 0 | 200 |

Perforations:
 Type perforation **SAWCUT**
 Size perforation **1/8 X 3**

From **140** feet to **200** 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 **200** feet

9. WATER LEVEL
 Static water level **81** 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 **GREAT BASIN DRILLING CO. OF NEVADA, INC.** Contractor
 Address **P.O. BOX 4220** Contractor
PAHRUMP, NV. 89048
 Nevada contractor's license number issued by the State Contractor's Board **47333**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1642**
 Signed *[Signature]*
 By driller performing actual drilling on-site or contractor
 Date **7/20/2005**

Date started **7/20/2005**, 19____
 Date completed **7/20/2005**, 19____

7. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

| G.P.M. | Draw Down (Feet Below Static) | Time (Hours) |
|--------|-------------------------------|--------------|
| | | |
| | | |
| | | |
| | | |

DCNR/DWR
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 AUG 05 2005
 LAS VEGAS OFFICE