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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

NOTICE OF INTENT NO. 50791

1. OWNER: JBR Environmental ADDRESS AT WELL LOCATION: 520 Cammochan
 MAILING ADDRESS: 5355 Kietzke Ln 520 Cammochan
Suit 100 Reno, NV 89511 fallen, NV 89406
 2. LOCATION: SW 1/4 NW 1/4 Sec. 210 T. 19 N. R. 28 E. Churchill County
 PERMIT NO. MD 1300 APN 008-391-29 2-343952 n-4372096
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: auger

6. LITHOLOGIC LOG Mud

| Material | Water Strata | From | To | Thickness |
|---------------------|--------------|-----------|-----------|-----------|
| <u>Silty sand</u> | | <u>0</u> | <u>15</u> | |
| <u>light gravel</u> | | <u>15</u> | <u>20</u> | |
| <u>Sandy gravel</u> | | <u>20</u> | <u>25</u> | |

8. WELL CONSTRUCTION
 Depth Drilled: 25 Feet Depth Cased: 25 Feet
 HOLE DIAMETER (BIT SIZE)
 From 0 Feet To 25 Feet
8 Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|-----------|
| <u>2</u> | | <u>sch 40</u> | <u>0</u> | <u>25</u> |

Perforations:
 Type perforation: pac
 Size perforation: 0.70
 From 15 feet to 25 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type: Neat Cement Cement Grout Concrete Grout
 Depth of Seal: 10
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 10 feet to 25 feet

9. WATER LEVEL
 Static water level: 15 feet below land surface
 Artesian flow: N/A G.P.M. N/A P.S.I.
 Water temperature: Cold F Quality: N/A

Date started: 9/19/05, 20 _____
 Date completed: 9/19/05, 20 _____

7. WELL TEST DATA

| TEST METHOD: | G.P.M. | Draw Down (Feet Below Static) | Time (Hours) |
|---|------------|-------------------------------|--------------|
| <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift | | | |
| | <u>N/A</u> | | |

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name: Andresen Exploration Drilling Contractor
 Address: 1635 Belford rd. Reno, NV 89509 Contractor
 Nevada contractor's license number issued by the State Contractor's Board: 34525
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller: 1028
 Signed: _____ By driller performing actual drilling on site or contractor
 Date: 10/31/05