

OFFICE USE ONLY
 Log No. 42554
 Permit No. 8105
 Basin 8105
 NOTICE OF INTENT NO. 23534

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

1. OWNER NEVADA JOHNSON ADDRESS AT WELL LOCATION 686 SHELTON
 MAILING ADDRESS GARDNERVILLE GARDNERVILLE

2. LOCATION NE 1/4 SW 1/4 Sec. 24 T 12 N R 20 E DOUGLAS County DOUGLAS
 PERMIT NO. 29-503-27 Parcel No. RHVENSTROTH Subdivision Name RHVENSTROTH

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 mud

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thick-ness |
|----------------------|--------------|------|-----|------------|
| CLAY | | 0 | 4 | 4 |
| SANDY CLAY | | 4 | 21 | 17 |
| SANDY CLAY w/COBBLES | | 21 | 46 | 25 |
| SANDY CLAY w/GRAVEL | | 46 | 54 | 8 |
| CEMENTED GRAVEL | | 54 | 75 | 21 |
| SANDY CLAY w/COBBLES | | 75 | 132 | 57 |
| CEMENTED GRAVEL | ✓ | 132 | 159 | 27 |
| SANDY CLAY w/COBBLES | | 159 | 160 | 1 |

8. WELL CONSTRUCTION
 Depth Drilled 160 Feet Depth Cased 160 Feet

HOLE DIAMETER (BIT SIZE)
 From 0 To 160
10 5/8 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>6 5/8</u> | <u>12</u> | <u>.188</u> | <u>0</u> | <u>160</u> |

Perforations:
 Type perforation FACTORY SLOTTED
 Size perforation 3 x 3/32
 From 140 feet to 160 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 160 feet

9. WATER LEVEL
 Static water level 55 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature COLD °F Quality GOOD

Date started 93 AUG 18 19-22, 19 93
 Date completed 93 AUG 19 19-24, 19 93

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

| | G.P.M. | Draw Down (Feet Below Static) | Time (Hours) |
|------------|------------|-------------------------------|--------------|
| <u>AIR</u> | <u>25+</u> | <u>-</u> | <u>1</u> |

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

Name EDDCO EXPLORATION, INC. Contractor
 Address 7780 CURRY RD. Contractor
FALLON, NV

Nevada contractor's license number issued by the State Contractor's Board 27673
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1726

Signed Pat J. Moore
 By driller performing actual drilling on site of contractor
 Date 7-24-93