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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. 27532

1. OWNER DAVE MOLINE ADDRESS AT WELL LOCATION 1900 CURRANT CT
 MAILING ADDRESS GARDNERVILLE GARDNERVILLE

2. LOCATION NW 1/4 NE 1/4 Sec. 1 T 12 N 20 E DOUGLAS County
 PERMIT NO. 23-480-72 WILDFLOWER Subdivision Name
 Issued by Water Resources Parcel No.

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	Thickness
SAND/COBEL'S		0	9	9
CEMENTED SAND/GRAVEL'S		9	11	2
SAND/GRAVEL		11	16	5
SANDY CLAY/COBEL'S		26	24	8
SANDY CLAY		24	37	13
CEMENTED GRAVEL/COBEL'S		37	63	26
SAND/GRAVEL		63	66	3
CEMENTED GRAVEL		66	86	14
SANDY CLAY/GRAVEL		86	106	20
SANDY CLAY/GRAVEL/COBEL'S		106	114	8
SANDY CLAY		114	123	9
SAND/GRAVEL		123	130	7
SANDY CLAY		130	144	14
SANDY CLAY/GRAVEL		144	200	56
SAND/GRAVEL		200	209	9
SANDY CLAY/GRAVEL'S		209	251	42
CLAY		251	260	9
SANDY CLAY/GRAVEL		260	270	10
SAND GRAVEL/BISALT		270	296	26
BISALT FRACTURES		296	337	41
SANDY CLAY		337	350	13
GRAY CLAY		350	351	1
SAND/GRAVEL/CLAY	✓	351	360	9
SANDS/GRAVEL'S	✓	360	364	4
CLAY (GRAY)		364	370	6

8. WELL CONSTRUCTION
 Depth Drilled 370 Feet Depth Cased 370 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
10 5/8 Inches 0 Feet 50 Feet
9 7/8 Inches 50 Feet 370 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>13</u>	<u>.188</u>	<u>+1</u>	<u>370</u>

Perforations:
 Type perforation FACTORY SLOTTED
 Size perforation 3 x 3/32
 From 350 feet to 370 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 370 feet

9. WATER LEVEL
 Static water level 190 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature COLD °F Quality GOOD

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 89406
 Nevada contractor's license number 27673
 issued by the State Contractor's Board.
 Nevada driller's license number issued by the 1726
 Division of Water Resources, the on-site driller.
 Signed Paul A. Mory
 By driller performing actual drilling on site or contractor
 Date 3-6-95

Date started 2-23, 1995
 Date completed 3-6, 1995

7. WELL TEST DATA

TEST METHOD:	<input type="checkbox"/> Bailer	<input type="checkbox"/> Pump	<input checked="" type="checkbox"/> Air Lift
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
<u>AIR</u>	<u>25+</u>	<u>—</u>	<u>2</u>