

OFFICE USE ONLY
 Log No. 489150
 Permit No. _____
 Basin. 105

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. 26586

1. OWNER MIKE HICKEY CONSTRUCTION ADDRESS AT WELL LOCATION 612 FRONTAGE GARDNERVILLE
 MAILING ADDRESS P.O. Box 1420 MINDEN, NV
 2. LOCATION SE 1/4 SW 1/4 Sec. 24 T. 12 N. R. 20 E. DOUGLAS County
 PERMIT NO. 29-050-14 Parcel No. _____ Subdivision Name RUEHNSTROTH
 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 MVD

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>BOLDERS / COBBLES</u>		<u>0</u>	<u>54</u>	<u>54</u>
<u>COBBLES / CEMENTED GRAVEL</u>		<u>54</u>	<u>68</u>	<u>14</u>
<u>CEMENTED GRAVEL</u>		<u>68</u>	<u>136</u>	<u>68</u>
<u>SAND / GRAVEL</u>		<u>136</u>	<u>148</u>	<u>12</u>
<u>CEMENTED GRAVEL / SAND</u>	<input checked="" type="checkbox"/>	<u>148</u>	<u>151</u>	<u>3</u>
<u>CEMENTED GRAVEL</u>		<u>151</u>	<u>168</u>	<u>17</u>
<u>SAND GRAVEL</u>	<input checked="" type="checkbox"/>	<u>168</u>	<u>180</u>	<u>12</u>

95 MAY 24 AM 10:43 RECEIVED STATE ENGINEERS OFFICE

8. WELL CONSTRUCTION
 Depth Drilled 180 Feet Depth Cased 180 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 5/8 Inches To 0 Feet 100 Feet
9 7/8 Inches 100 Feet 180 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>41</u>	<u>180</u>

Perforations:
 Type perforation FACTORY SLOTTED
 Size perforation 3 X 3/32
 From 160 feet to 180 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type: Neat Cement Cement Grout Concrete Grout
 Depth of Seal 100
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 100 feet to 180 feet

9. WATER LEVEL
 Static water level 85 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 FALLON, NV 89406 Contractor
 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 or contractor
 Date 5-12-95

7. WELL TEST DATA
 TEST METHOD: Bailer Pump Air Lift

	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>AIR</u>	<u>15</u>	<u>—</u>	<u>2</u>

 Date started 5-1, 1995
 Date completed 5-12, 1995