

STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 69316
 Permit No. 106
 Basin 106

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

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

NOTICE OF INTENT NO. 32646

1. OWNER Marie Johnson Kent Neddenriep ADDRESS AT WELL LOCATION 1963 Comstock
 MAILING ADDRESS 176 St Rt 88 Tropaz W.
Gardnerville NV 89410
 2. LOCATION SE 1/4 SE 1/4 Sec 29 T 10 S R 22 E County Douglas
 PERMIT NO. 39-134-04 Subdivision Name Tropaz Lake
 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 Mid

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Boulders and Cabbles</u>				
<u>Black Slate and</u>	<u>0</u>	<u>0</u>	<u>47</u>	<u>47</u>
<u>Volcanic Gravels</u>				
<u>Black Slate & Gravels</u>		<u>47</u>	<u>89</u>	<u>42</u>
<u>Small Sands and Gravels</u>		<u>89</u>	<u>110</u>	<u>21</u>
<u>Brown and Black Clay</u>		<u>110</u>	<u>127</u>	<u>17</u>
<u>Black Slate and</u>	<u>XX</u>	<u>127</u>	<u>140</u>	<u>13</u>
<u>Broken Fractures</u>				

8. WELL CONSTRUCTION
 Depth Drilled 140 Feet Depth Cased 140 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
10 3/4 Inches 0 Feet 140 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 3/8</u>	<u>13.03</u>	<u>.188</u>	<u>0</u>	<u>140</u>

Perforations:
 Type perforation Mill Slot
 Size perforation 3 x 1/32
 From 120 feet to 140 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 100' Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 100 feet to 140 feet

9. WATER LEVEL
 Static water level: 45 feet below land surface
 Artesian flow _____ G.P.M. 15-18 P.S.I.
 Water temperature Cold °F Quality Good

Date started 10-11, 1997
 Date completed 10-16, 1997

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>15+8</u>	<u>35</u>	<u>3 HRS</u>	

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Capital City Well Drilling Contractor
 Address 20 Kit Kat Dr. Contractor
Carson City NV 89706
 Nevada contractor's license number 41775
 issued by the State Contractor's Board.
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1905
 Signed Michael Z. Haack
 By driller performing actual drilling on site or contractor
 Date 10-16-97