

COPIES TO
 - DIVISION OF WATER RESOURCES
 - CLIENT'S COPY
 - WELL DRILLER'S COPY

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

OFFICE USE ONLY
 Log No. 82145
 Permit No. 105
 Basin 105
 NOTICE OF INTENT NO. 2006

PRINT OR TYPE ONLY

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

1. OWNER **JEFF KIRBY HOMES**
 MAILING ADDRESS **GARDNERVILLE, NV 89410**
 ADDRESS AT WELL LOCATION **2659 BECKEY MINDEN, NV 89423**

2. LOCATION NW NE 33
SE $\frac{1}{4}$ SW $\frac{1}{4}$ Sec 34 T 14 N R 20 E **DOUGLAS** County

PERMIT NO. 1420-33-701-019 **JOHNSONLANE AREA**
 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 **MUD**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
HARD PAN CLAY		0	6	6
SMALL COURSE SANDS		6	47	41
DG SANDS AND CLAY		47	85	38
FINE BROWN SANDS		85	118	33
BROWN CLAY		118	137	19
COURSE SMALL SANDS	XXX	137	160	23
FINE BROWN SANDS				

8. WELL CONSTRUCTION
 Depth Drilled 160 Feet Depth Cased 160 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 3/4 Inches To 0 Feet 160 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>13.03</u>	<u>.188</u>	<u>0</u>	<u>160</u>

Perforations:
 perforation **FACTORY MILL SLOT**
 perforation 3 X 3/32
135 feet to 155 feet
 feet to feet
 feet to feet
 feet to feet
 feet to feet

Seal Type:
 Seal 55' Neat Cement
 Cement Grout
 Concrete Grout
 Method: Pumped
 Cased: Yes No
55 feet to 160 feet

WATER LEVEL
 Water level 20 feet below land surface
 Flow 25 G.P.M. 25 P.S.I.
 Temperature COLD °F Quality GOOD

RECEIVED
 00 NOV -1 AM 8:28

WAIVER LTR
 9/4/2000
 NO WAIVER
 10/13/00

Date started 10-11, 20 00
 Date completed 10-12, 20 00

7. WELL TEST DATE

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>25</u>	<u>30</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
 Address 20 K.F. KAY DR. 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 L. Hack
 By driller performing actual drilling on site or contractor
 Date 10/13/00

