

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. 84121
 Permit No. _____
 Basin 105
 NOTICE OF INTENT NO. 46255

PRINT OR TYPE ONLY

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

1. OWNER **RON MORGAN**
 MAILING ADDRESS _____
LAS VEGAS, NV 89109

ADDRESS AT WELL LOCATION **1891 ARABIAN LANE**
GARDNERVILLE, NV 89410
1893 Arabian Ln.

2. LOCATION **NW 1/4 NW 1/4 Sec 24 T 12 N R 20 E** **DOUGLAS** County
 PERMIT NO. 1220/24/302/039-010 **RHUENSTROTH AREA** Lot 1

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	Thickness
OVERBURDEN		0	3	3
BRWN CLAY		3	35	32
COURSE OBSIDIAN SANDS		35	85	50
BROWN CLAY		85	110	25
COURSE COBBLES AND LARGE GRAVELS		110	163	53
BLACK SLATE AND VOLCANIC GRAVELS		163	196	33
FRACTURED GRAVELS	XXX	196	220	24

8. WELL CONSTRUCTION

Depth Drilled 220 Feet Depth Cased 220 Feet

HOLE DIAMETER (BIT SIZE)

From	To
<u>10 3/4</u> Inches	<u>0</u> Feet <u>220</u> 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>220</u>

Perforations:

Type perforation MILL SLOT
 Size perforation 3 X 3/32

From 200 feet to 220 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 55 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 55 feet to 220 feet

9. WATER LEVEL

Static water level 80 feet below land surface
 Artesian flow _____ G.P.M. 25 P.S.I.
 Water temperature COLD °F Quality GOOD

Date started 5/22, 20 01
 Date completed 5/25, 20 01

7. WELL TEST DATE

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>25</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 DRIVE**
 (CONTRACTOR)
CARSON CITY, NV 89706
 Nevada contractor's license number issued by the State Contractor's Board 41775
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1905

Signed Michael Zabeck
 By driller performing actual drilling on site or contractor
 Date 5/28/01