

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. 85449
 Permit No. _____
 Basin 105
 NOTICE OF INTENT NO. 46383

PRINT OR TYPE ONLY

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

1. OWNER **BLAIN MCGUIRE CONSTRUCTION** ADDRESS AT WELL LOCATION **1890 COLT GARDNERVILLE, NV 894510**
 MAILING ADDRESS **2110 EASTLAKE BLVD CARSON CITY, NV 89703**

2. LOCATION **NE 1/4 SW 1/4 Sec 24 T 12 N R 20 E DOUGLAS County**
 PERMIT NO. **1220/24/201/27** **RHUENSTROTH SUBDIVISION**

3. WORK PERFORMED
 New Well Replace Recondition Deepen Abandon Other _____
 4. PROPOSED USE
 Domestic Municipal/Industrial Irrigation Monitor Test Stock
 5. WELL TYPE
 Cable Rotary RVC Air Other **MUD**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
HARDPAN CLAY		0	5	5
COURSE SANDS AND BROWN CLAY		5	16	9
COURSE GRAVELS		16	21	5
BROWN CLAY		21	45	24
LARGE GRAVELS		45	119	84
COURSE GRAVELS		119	165	46
VOLCANIC SANDS				
LARGE FRACTURED GRAVELS	XXX	165	200	35

8. WELL CONSTRUCTION
 Depth Drilled 200 Feet Depth Cased 200 Feet
 HOLE DIAMETER (BIT SIZE)
 From _____ To _____
10 3/4 Inches 0 Feet 100 Feet
9 7/8 Inches 100 Feet 200 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>200</u>

Perforations:
 Type perforation **FACTORY MILL SLOT**
 Size perforation 3 X 3/32
 From 160 feet to 200 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 200 feet

9. WATER LEVEL
 Static water level 45 feet below land surface
 Artesian flow _____ G.P.M. 30 P.S.I.
 Water temperature COLD °F Quality GOOD

Date started 11/21, 20 01
 Date completed 11/23, 20 01

7. WELL TEST DATE

TEST METHOD:	Bailer	Pump	Air Lift
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Draw Down (Feet Below Static)		Time (Hours)
	<u>30</u>	<u>40</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 Heck
 By driller performing actual drilling on site or contractor
 Date 11/24/01