

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

OFFICE USE ONLY
 Log No. 85450
 Permit No. _____
 Basin 105

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. **47245**

1. OWNER Dale Armstrong ADDRESS AT WELL LOCATION 1871 Fishsprings Road
 MAILING ADDRESS 2172 Mel Dr. Gardnerville, Nv. 8941

2. LOCATION SW 1/4 NE 1/4 Sec. 1 T 12N N/S R 20E E Douglas County
 PERMIT NO. 1220-01-001-052 Wildflower
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
Sandy Soil	no	0	6	6
Unsorted sand and gravel	No	6	22	16
Sandy clay and gravel	No	22	165	143
Brown Clay	No	165	201	36
Fine sand	No	201	204	3
Smal gravel and Sand	yes	204	230	26

8. WELL CONSTRUCTION
 Depth Drilled 230 Feet Depth Cased 230 Feet
 HOLE DIAMETER (BIT SIZE)
 10 5/8 inches From +2 feet To 230 feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	13	.188	+2	230

Perforations:
 Type perforation Factory Milled
 Size perforation 1/8" X 3.6 row
 From 210 feet to 230 feet

Surface Seal: Yes No
 Depth of Seal 100
 Placement Method: Pumped Poured
 Seal Type: Neat Cement Cement Grout Concrete Grout
 Gravel Packed: Yes No
 From 100 feet to 230 feet

9. WATER LEVEL
 Static water level 95 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 Road Contractor
Fallon, Nv. 89406
 Nevada contractor's license number issued by the State Contractor's Board 27673A
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1586
 Signed [Signature]
 By driller performing actual drilling on-site or contractor
 Date 11/25/2001

Date started 11/19/2001 19
 Date completed 11/22/2001 19

7. WELL TEST DATA

TEST METHOD:	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>1hr</u>

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