

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. 86312
 Permit No. _____
 Basin 105
 NOTICE OF INTENT NO. 42042

PRINT OR TYPE ONLY

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

1. OWNER **JOHNSON DEVELOPMENT**
 MAILING ADDRESS **P.O. BOX 1848**
GARDNERVILLE, NV 89410
 ADDRESS AT WELL LOCATION **1989 SORREL DR**
GARDNERVILLE, NV 89410

2. LOCATION NW $\frac{1}{4}$ SE $\frac{1}{4}$ Sec 19 T 12 N R 21 E DOUGLAS County
 PERMIT NO. 1221-19-001-019 **RHUENSTROTH AREA**

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
OVERBURDEN		0	3	3
BROWN HARDPAN CLAY		3	23	20
BROWN SANDY CLAY SMALL SANDS		23	145	122
SMALL GRAVELS OBSIDIAN W/ CLAY		145	185	40
FRACTURED GRAVELS WITH CLAY STRATAS		185	200	15
LARGER GRAVELS COLORED GRAVELS VERY FRACTURED	XXX	200	250	50

8. WELL CONSTRUCTION
 Depth Drilled 250' Feet Depth Cased 250' Feet
HOLE DIAMETER (BIT SIZE)
 From _____ To _____
10 3/4 Inches 0 Feet 250 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	13.03	.188	+2	250

 Perforations:
 Type perforation **FACTORY MILL SLOT**
 Size perforation 3 X 3/32
 From 230 feet to 250 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 60' Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 60' feet to 250' feet
 9. WATER LEVEL
 Static water level 90' feet below land surface
 Artesian flow _____ G.P.M. 35 P.S.I.
 Water temperature COLD °F Quality GOOD

Date started 3/14, 20 02
 Date completed 3/19, 20 02

7. WELL TEST DATE

TEST METHOD:	TEST METHOD:		Time (Hours)
	G.P.M.	Draw Down (Feet Below Static)	
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>25</u>	<u>35 FT</u>	<u>2 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 J. Jack
 By driller performing actual drilling on site or contractor
 Date 3/24/02