

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. 87808
 Permit No. _____
 Basin 105
 NOTICE OF INTENT NO. 46422

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 **637 DRURY CIRCLE**
 MAILING ADDRESS **2110 EAST LAKE BLVD** **GARDNERVILLE, NV 89410**
CARSON CITY, NV 89703
 2. LOCATION **SW 1/4 SW 1/4 Sec 24 T 12 N R 20 E 637 Derby DOUGLAS County**
 PERMIT NO. **1220-24-401-021** **RUHENSTROTH**
 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
LARGE BOULDER		0	4	4
LARGE BOULDERS AND LARGE COBBLES		4	30	26
COBBLES AND OBSIDIAN BOULDERS		30	85	55
OBSIDIAN GRAVELS		85	130	45
FRACTURED GRAVELS SMALL BOULDERS	X	130	140	10
CLAY SEAM		140	145	5
VERY FRACTURED OBSIDIAN GRAVELS	XXX	145	180	35

8. WELL CONSTRUCTION
 Depth Drilled **180'** Feet Depth Cased **180'** Feet
 HOLE DIAMETER (BIT SIZE)
 From **10 3/4** Inches To **0** Feet **180** 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	0	180

Perforations:
 Type perforation **FACTORY MILL SLOT**
 Size perforation **3 X 3/32**
 From **160** feet to **180** feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal **100** Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From **100** feet to **180** feet

9. WATER LEVEL
 Static water level **65** feet below land surface
 Artesian flow _____ G.P.M. ~~25~~ 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 **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 **2157**
 Signed Rick Curran
 By driller performing actual drilling on site or contractor
 Date **6/27/02**

Date started **6/16, 20 02**
 Date completed **6/19, 20 02**

7. WELL TEST DATE

TEST METHOD:	Bailer	Pump	Air Lift
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
25+	30	3 HRS	

RECEIVED
 02 JUL 30 AM 9:16
 WATER RESOURCES OFFICE