

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. 8778-18
 Permit No. 105
 Basin 105
 NOTICE OF INTENT NO. 49394

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 **1902 COLT GARDNERVILLE, NV 894510**
 MAILING ADDRESS **2110 EASTLAKE BLVD CARSON CITY, NV 89703**

2. LOCATION S.W. 1/4 NE 1/4 Sec 24 T 12 N R 20 E **DOUGLAS** County
 PERMIT NO. 1220/24/601/027 **RHUENSTROTH SUBDIVISION**
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
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 VOLCANIC SANDS		119	165	46
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)
6 5/8	13.03	.188	0	200

Perforations:
 Type perforation **FACTORY MILL SLOT**
 Size perforation **3 X 3/32**
 From 180 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

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)

Date started 8/19, 20 02
 Date completed 8/21, 20 02

7. WELL TEST DATE

TEST METHOD:	<input type="checkbox"/> Bailer	<input type="checkbox"/> Pump	<input checked="" type="checkbox"/> Air Lift
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
<u>30</u>	<u>40</u>	<u>3 HRS</u>	

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 [Signature]
 By driller performing actual drilling on site or contractor
 Date 8/21/02

RECEIVED
 02 AUG 26 AM 9:36
 STATE ENGINEERS OFFICE