

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

OFFICE USE ONLY
 Log No. **88488**
 Permit No. _____
 Basin **106**

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. **5060**

1. OWNER **Barbra Back** ADDRESS AT WELL LOCATION **1957 Eureka Gardnerville NV.**
 MAILING ADDRESS **1957 Eureka Gardnerville, NV 89410**

2. LOCATION **NE 1/4 SW 1/4 Sec. 29 T 10N N/S R 22E E Douglas** County
 PERMIT NO. **1022-29-7-410-016** Parcel No. **Topaz Lake** 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
Andesite Sluff	no	0	42	42
Andesite Boulders	no	42	57	15
Andesite Sluff	no	57	107	50
Fractured andesite	no	107	112	5
Hard Diorite boulders	no	112	122	10
Andesite Sluff	no	122	132	10
Hard Diorite Boulders	no	132	147	15
Andesite Sluff with	no	147		
Br. Clay			235	88
Brown Clay	no	235	243	8
Andesite Boulders	yes	243	268	25
Andesite Sluff with	yes	268		
br. clay			285	17
Andesite Sluff	yes	285	320	35

8. WELL CONSTRUCTION

Depth Drilled **320** Feet Depth Cased **320** Feet

HOLE DIAMETER (BIT SIZE)

	Inches	From	To	Feet	Feet
10 5/8		0	100		
9 7/8		100	280		
6 1/8		280	320		

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	13	.188	+2	280
5 9/16	11	.188	260	320

Perforations:
 Type perforation **Factory milled**
 Size perforation **3/16 X 3 6 Row**

From	To	Feet	Feet
240	280		
280	320		

Surface Seal: Yes No Seal Type:
 Depth of Seal **100ft** Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From **100** feet to **280** feet

9. WATER LEVEL

Static water level **185** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **cold** °F Quality **good**

Date started **6/28/2002**, 19____
 Date completed **7/8/2002**, 19____

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	25		2 hrs

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 or on-site contractor
 Date **7/9/2002**