

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. 93729
 Permit No. _____
 Basin 105
 NOTICE OF INTENT NO. 49764

PRINT OR TYPE ONLY

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

1. OWNER D E JANSEE & CO INC. ADDRESS AT WELL LOCATION 1781 WATSON CT
 MAILING ADDRESS P.O. BOX 703 GARDNERVILLE, NV 89410
GENOA, NV 89411

2. LOCATION SE 1/4 SE 1/4 Sec 26 T 13 N R 20 E DOUGLAS County
 PERMIT NO. 1320-26-002-043 SIERRA SHADOWS

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
HARD PAN CLAY		0	5	5
COURSE GRAVELS		5	13	8
COBBLES AND SMALL GRAVELS		13	116	108
BROWN CLAY		116	165	57
SMALL GUMMY CLAY CLAY STRATA		165	173	8
BROWN CLAY WITH SMALL GRAVELS		173	205	32
GUMMY CLAY		205	215	10
FRACTURED GRAVELS				
SMALL OBSIDIAN SANDS AND CLAY		215	250	35
FRACTURED GRAVELS	XXX	250	300	50

8. WELL CONSTRUCTION
 Depth Drilled 300' Feet Depth Cased 300' Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 3/4 Inches To 0 Feet 300 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>13.03</u>	<u>.188</u>	<u>+2</u>	<u>20</u>
<u>sdr21 6 5/8</u>	<u>4.06</u>	<u>.216</u>	<u>20</u>	<u>300</u>

Perforations:
 Type perforation SAW CUT
 Size perforation 3 X 3/32
 From 260 feet to 300 feet
 From _____ feet to _____ feet
 From _____ feet to _____ 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 300 feet

9. WATER LEVEL
 Static water level 125 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 & PUMPS INC.
 (CONTRACTOR)

Address 20 KIT KAT DRIVE
 (CONTRACTOR)
CARSON CITY, NV 89706
 Nevada contractor's license number issued by the State Contractor's Board 55548
 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 8/4/04

Date started 7/24, 20 04
 Date completed 7/27, 20 04

7. WELL TEST DATE

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			
	<u>30</u>	<u>50</u>	<u>3 HRS</u>