

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. 93730
 Permit No. _____
 Basin 105
 NOTICE OF INTENT NO. 49760

PRINT OR TYPE ONLY

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

1. OWNER **DAN HICKEY CONSTRUCTION** ADDRESS AT WELL LOCATION **176 TAYLOR CREEK RD**
 MAILING ADDRESS **1456 FOOTHILLS RD** **GARDNERVILLE, NV 89410**
NW GARDNERVILLE, NV 89410

2. LOCATION SW $\frac{1}{4}$ SW $\frac{1}{4}$ Sec 3 T 12 N R 19 E DOUGLAS County
 PERMIT NO. NW 1219-04-001-026

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
COURSE DG SANDS		0	6	6
DARK BROWN SANDS				
RUSTY BROWN DG SANDS AND CLAY		6	47	41
BROWN CLAY		47	110	63
SILTY GRAY SANDS		110	157	47
GRAY CLAY		157	160	3
FRACTURED DG SANDS AND COBBLES		160	180	20
COURSE DG SANDS		180	213	33
BROWN CLAY		213	231	18
FRACTURED GRANITE	XXX	231	265	34
LOOSE SANDS				

8. WELL CONSTRUCTION
 Depth Drilled 265 Feet Depth Cased 265 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 3/4 Inches To 0 Feet 265 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>0</u>	<u>265</u>

Perforations:
 Type perforation MILL SLOT
 Size perforation 3 X 3/32
 From 245 feet to 265 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 265 feet

9. WATER LEVEL
 Static water level _____ 45 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 894706

Nevada contractor's license number issued by the State Contractor's Board 0055548
 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 7/10/04

Date started 04 AUG -5 AM 11:51
 Date completed 7/2, 20 04
 STATE ENGINEER'S OFFICE

7. WELL TEST DATE

TEST METHOD:	Bailer	Pump	Air Lift
G.P.M.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Draw Down (Feet Below Static)			<u>100</u>
Time (Hours)			<u>3 HRS</u>