

COPIES TO
 - DIVISION OF WATER RESOURCES
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STATE OF NEVADA

OFFICE USE ONLY

DIVISION OF WATER RESOURCES
 WELL DRILLER'S REPORT

Log No. 101052
 Permit No. _____
 Basin φ97
 NOTICE OF INTENT NO. 55523

PRINT OR TYPE ONLY

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

1. OWNER Vidler Fish Springs Ranch LLC Well #4 ADDRESS AT WELL LOCATION Fish Springs Ranch, North of Sparks, Nevada
 MAILING ADDRESS 704 W. Nye Lane, Suite 201 Carson City, NV 89701 GPS: _____

2. LOCATION NW 1/4 SW 1/4 Sec 10 T 26 N R 19 E Washoe County
 PERMIT NO. 74055/W587 N/A
 Issued by Water Resources APN _____ 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 _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Brown clay		0	15	15
Gray sand		15	130	115
Brown gravel		130	510 520	380
<u>N 40 8.001</u>				
<u>W 119 50.450 NAD83</u>				
<u>N 40.133465</u>				
<u>W 119.839814 NAD83</u>				
Between 16" & 32";				
Hole Plug		100	95	
Neat Cement		95	0	

8. WELL CONSTRUCTION

Depth Drilled 510 ~~520~~ Feet Depth Cased 510 Feet

HOLE DIAMETER (BIT SIZE)

From	To
46 Inches	0 Feet 22 Feet
38 Inches	22 Feet 106 Feet
26 Inches	101 Feet 520 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
40	210.93	0.500	0	22
32	126.66	0.375	0	101
16	52.27	0.312	+2	510

Perforations:
 Type perforation Full Flow Louvered
 Size perforation 0.090"
 From 120 feet to 200 feet
 From 210 feet to 330 feet
 From 410 feet to 510 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 30% Grout
 From 100 feet to 520 feet

9. WATER LEVEL
 Static water level 47 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 50 °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.

Date started 06/04, 20 06
 Date completed 06/17, 20 06

7. WELL TEST DATE

TEST METHOD:	Bailer	Pump	Air Lift
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
<u>545</u>	<u>5</u>	<u>1/2 Hour</u>	

Name Lang Exploratory Drilling (CONTRACTOR)
 Address P.O. Box 5279 (CONTRACTOR)
Elko, NV 89802-5279
 Nevada contractor's license number issued by the State Contractor's Board 0021976
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2308
 Signed _____
 By driller performing actual drilling on site or contractor
 Date 06/20/06

