

STATE OF NEVADA
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY
 Log No. 102152
 Permit No. _____
 Basin 105

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

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

NOTICE OF INTENT NO. **57824**

1. OWNER **David Norvell**
 MAILING ADDRESS **1575 Chiquita Drive Menden, NV 89423**
 ADDRESS AT WELL LOCATION **1575 Chiquita Drive**
 2. LOCATION **SE^{SW} 1/4 SE 1/4 Sec. 34 T 14N N/S R 20E E Douglas County**
 PERMIT NO. **1420-34-811-021** Parcel No. **El Rancho** 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 |
|--|--------------|------|----|-----------|
| On this date we abandoned a 6" x 136' well by perforating with Mills Knife from 126' to 78' we then pumped 1.75 cubic yards of neat cement mixed 5.2 gallons of water per sack. We pumped using tremie pipe from the bottom to the top of the well. | | | | |
| NAD 83 | | | | |
| N39.02672 | | | | |
| W 119.72263 | | | | |
| <i>39,026811 N</i> | | | | |
| <i>119,721620 W NAD 27</i> | | | | |

8. WELL CONSTRUCTION
 Depth Drilled **136** Feet Depth Cased **136** Feet
 HOLE DIAMETER (BIT SIZE)
 From To Feet Feet
 Inches _____ Feet _____ Feet
 Inches _____ Feet _____ Feet

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|--------------------|-------------------------|-------------|------------|
| 6 5/8 | 12.92 | .188 | 0 | 136 |

Perforations:
 Type perforation **Mills Knife**
 Size perforation **Puncture**
 From **78** feet to **126** feet
 From _____ feet to _____ feet

Surface Seal: Yes No
 Depth of Seal _____
 Placement Method: Pumped Poured
 Seal Type: Neat Cement Cement Grout Concrete Grout
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level **128** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name **Bruce Mackay Pump & Well Service, Inc.** Contractor
 Address **1600 Mt. Rose Hwy Reno, NV 89511** Contractor
 Nevada contractor's license number issued by the State Contractor's Board **23096**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2299**
 Signed *R. Bruce Mackay*
 By driller performing actual drilling on-site or contractor
 Date **10/31/2006**

Date started **10/31/2006** .19
 Date completed **10/31/2006** .19

7. WELL TEST DATA

| TEST METHOD: | Bailer | Pump | Air Lift |
|--------------|-------------------------------|--------------|----------|
| G.P.M. | Draw Down (Feet Below Static) | Time (Hours) | |
| | | | |
| | | | |

STATE ENGINEERS OFFICE
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