

Log No. 76569
 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. 36775

1. OWNER Mr & Mrs Larry Walsh ADDRESS AT WELL LOCATION 1494 Choke Cherry Ct
 MAILING ADDRESS PO Box 1233
Minden, NV 89423
 2. LOCATION NW 1/4 SW 1/4 Sec 36 T 13 N R 20 E Douglas County
 PERMIT NO. 23-473-250 Wildflower 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
<u>Red Clay & Boulders</u>		<u>0</u>	<u>7</u>	<u>7</u>
<u>SAND & GRAVEL</u>		<u>7</u>	<u>22</u>	<u>15</u>
<u>SANDY CLAY</u>		<u>22</u>	<u>32</u>	<u>10</u>
<u>SAND & GRAVEL</u>		<u>32</u>	<u>163</u>	<u>131</u>
<u>SANDY CLAY</u>		<u>163</u>	<u>217</u>	<u>54</u>
<u>GRAVEL</u>	<input checked="" type="checkbox"/>	<u>217</u>	<u>223</u>	<u>6</u>
<u>Clay</u>		<u>223</u>	<u>230</u>	<u>7</u>
<u>GRAVEL</u>	<input checked="" type="checkbox"/>	<u>230</u>	<u>238</u>	<u>8</u>
<u>Clay</u>		<u>238</u>	<u>240</u>	<u>2</u>

8. WELL CONSTRUCTION
 Depth Drilled 240 Feet Depth Cased 240 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
10 5/8 Inches 0 Feet 60 Feet
9 7/8 Inches 60 Feet 240 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</u>	<u>.188</u>	<u>+ 2</u>	<u>240</u>

Perforations:
 Type perforation Factory Mill
 Size perforation 2 1/2 x 1 1/2 G. Row
 From 220 feet to 240 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 50 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 50 feet to 240 feet

9. WATER LEVEL
 Static water level 72 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature Cool °F Quality Good

Date started March 29 1999
 Date completed April 5 1999

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>+25</u>		<u>2 hrs</u>

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 Rd Contractor
Fallen, NV 89406
 Nevada contractor's license number issued by the State Contractor's Board 27673 A
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1586
 Signed [Signature]
 By Will performing actual drilling on site or contractor
 Date 4-6-99