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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. 43070

1. OWNER HAROLD WARD ADDRESS AT WELL LOCATION 1410 Brentwood Ct Gardnerville NV
 MAILING ADDRESS P.O. Box 7678 South Lake Tahoe, CA 96158
 2. LOCATION NE 1/4 SE 1/4 Sec 34 (35) 13 N 20 E Douglas County
 PERMIT NO. 23-260-65 Wild Flower 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	Thick-ness
Sandy Soil		0	8	8
Med Gravel		8	79	71
Sandy Clay		79	111	32
Med Gravel		111	124	13
Sandy Clay		124	145	21
Small Well Sorted Gravel	✓	145	166	21
Sandy Clay		166	175	9
Small Well Sorted Gravel	✓	175	196	21
Sandy Clay		196	200	4

8. WELL CONSTRUCTION
 Depth Drilled 200 Feet Depth Cased 200 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 5/8 Inches 0 Feet To 200 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 7/8</u>	<u>13</u>	<u>.188</u>	<u>+2</u>	<u>200</u>

Perforations:
 Type perforation Factory Milled
 Size perforation 1 1/2 x 3
 From 180 feet to 200 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal 100
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 100 feet to 200 feet

9. WATER LEVEL
 Static water level 41 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature Cool °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 Eddco Exploration Inc Contractor
 Address 7780 CURRY Rd Contractor
Fallon, NV 89406
 Nevada contractor's license number issued by the State Contractor's Board 27673A
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1586
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 4-24-08

Date started 4-20-00 19____
 Date completed 4-23-00 19____

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>Air</u>	<u>+25</u>	<u>1hr</u>

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 STATE ENGINEERING OFFICE