

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. **82129**
 Permit No. **105**
 Basin **105**
 NOTICE OF INTENT NO. **42002**
1939 BORDA
GARDNERVILLE, NV 89410

PRINT OR TYPE ONLY

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

1. OWNER **MR. & MRS. HART (KIM POSNIEN CONST.)** ADDRESS AT WELL LOCATION
 MAILING ADDRESS **GARDNERVILLE, NV 89410** **GARDNERVILLE, NV 89410**

2. LOCATION **NE 1/4 NE 1/4 Sec 35 T 13 N R 20 E DOUGLAS County**
 PERMIT NO. **23-472-505** WILDFLOWER SUB.
 Issued by Water Resources Parcel No. 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
OVERBURDEN		0	3	3
COBBLES HARDPAN / CLAY		3	8	5
BROWN CLAY AND COBBLES		8	78	70
CEMENTED GRAVELS		78	110	32
BROWN CLAY		110	265	155
BROWN SANDY CLAY		265	328	63
GRAY GUMMY CLAY		328	530	202
VOLCANIC SANDS	XXX	530	600	70
SOFT ZONE/ FRACTURED SANDS				

8. WELL CONSTRUCTION

Depth Drilled **600'** Feet Depth Cased **600'** Feet

HOLE DIAMETER (BIT SIZE)

From	To
11" Inches	0 Feet 600' 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	13.03	.188	0	600'

Perforations:

Type perforation **MILL SLOT**
 Size perforation **3X 3/32**

From **540'** feet to **600'** feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal **55'** Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From **55'** feet to **600'** feet

9. WATER LEVEL

Static water level **240'** feet below land surface
 Artesian flow _____ G.P.M **30+** P.S.I
 Water temperature **WARM** °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 AND PUMPS**
 (CONTRACTOR)
 Address **20 KIT KAT DRIVE**
 (CONTRACTOR)
CARSON CITY, NV 89706
 Nevada contractor's license number issued by the State Contractor's Board **41775**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1905**

Signed *[Signature]*
 By driller performing actual drilling on site or contractor
 Date **9/5/00**

Date started **8/25, 20 00**
 Date completed **9/1, 20 00**

7. WELL TEST DATE

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
30+	75'	5 HRS