

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. 91564
 Permit No. _____
 Basin 105
 NOTICE OF INTENT NO. 49715

PRINT OR TYPE ONLY

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

1. OWNER **RAY YOUNG**
 MAILING ADDRESS 7017 Schulz Wy CC 89701
MINDEN, NV 89423

ADDRESS AT WELL LOCATION **1663 KISS LANE**
MINDEN, NV 89423

2. LOCATION SW 1/4 NE 1/4 Sec 11 T 13 N R 20 E **DOUGLAS County**

PERMIT NO. 1320-11-001-006

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
DG SANDS & CLAY		3	21	18
BROWN CLAY		21	87	66
DG SANDS		87	145	78
BROWN GUMMY CLAY		145	186	41
BROWN SANDS		186	209	23
COURSE DG SAMDS	X	209	240	31
GRAVELS AND OBSIDIAN SANDS	XX	240	280	40

8. WELL CONSTRUCTION
 Depth Drilled 280 Feet Depth Cased 280 Feet
HOLE DIAMETER (BIT SIZE)
 From _____ To _____
10 5/8 Inches 0 Feet 280 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	280

Perforations:
 Type perforation _____
 Size perforation **FACTORY MILL SLOT**
3X 3/32
 From 260 feet to 280 feet
 From _____ feet to _____ 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
 From 100 feet to 240 feet

9. WATER LEVEL
 Static water level 110 feet below land surface
 Artesian flow _____ G.P.M. 25 P.S.I.
 Water temperature COLD °F Quality GOOD

Date started 11/24, 20 03
 Date completed 11/26, 20 03

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.

7. WELL TEST DATE

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>25</u>	<u>45</u>	<u>3 HRS</u>	

Name **CAPITAL CITY WELL DRILLING & PUMP INC.**
 (CONTRACTOR)
 Address 20 KIT KAT DRIVE
 (CONTRACTOR)
CARSON CITY, NV 898706
 Nevada contractor's license number issued by the State Contractor's Board 0055548
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2157
 Signed Rick Crane
 By driller performing actual drilling on site or contractor
 Date 11/28/03