

WELL DRILLER'S REPORT

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

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

NOTICE OF INTENT NO. **56618**

1. OWNER Jake & Alice Daniels ADDRESS AT WELL LOCATION 2040 Eastlake Blvd.
 MAILING ADDRESS 2040 Eastlake Blvd.
Washoe Valley, NV 89704

2. LOCATION NE 1/4 NE 1/4 Sec. 31 T 17N N/S R 20E E Washoe County
 PERMIT NO. 050-361-11 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 _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Gray granite		300	327	27
Soft zone		327	328	1
Gray granite		328	383	55
Soft zone some clay	x	383	394	11
Gray granite		394	414	20
Fracture	x	414	417	3
Gray granite		417	446	29
Fracture	x	446	447	1
Gray granite		447	463	16
Fracture		463	464	1
Gray granite		464	500	36

Washoe County Well Permit # WL 060018

8. WELL CONSTRUCTION
 Depth Drilled 500 Feet Depth Cased 500 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
<u>6 1/8</u>	<u>300</u>	<u>500</u>		

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>5</u>	<u>10.79</u>	<u>.188</u>	<u>97</u>	<u>500</u>

Perforations:
 Type perforation Machine cut
 Size perforation 3/32 x 3

From	To	Feet	Feet
	<u>395</u>		<u>415</u>
	<u>435</u>		<u>455</u>
	<u>475</u>		<u>495</u>

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 53 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature Cool °F Quality Not tested

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
 Contractor _____
Reno, NV 89511
 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 923
 Signed R. Bruce MacKay
 By driller performing actual drilling on-site or contractor
 Date 2/2/2006

Date started 1/27/2006, 19____
 Date completed 1/31/2006, 19____

7. WELL TEST DATA

TEST METHOD:	TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift		
	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
	<u>40+</u>		<u>3</u>