

OFFICE USE ONLY
 Log No. **100380**
 Permit No. **30806**
 Basin **212**

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. **30-216**

1. OWNER **Chris ZARPAS - 08B** ADDRESS AT WELL LOCATION **7320 S. Cimarron Road Las Vegas Nevada Clark**
 MAILING ADDRESS _____
 2. LOCATION **S. 1/4 S.E. 1/4 Sec. 04 T. 21S N/S R. 60 E** County **Clark**
 PERMIT NO. **30806** Parcel No. **163-011-801-005** 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	Thickness
Pull 672' 1/4 pipe + Pump				
Seal well				
Try to pull casing				
Bail well to Bottom				
Mills knife from Bottom to 110'				
Pump meet cement from Bottom up to surface and cap				
13.5 cu yards cement				
PLUGGED BY GWMP ORIG PLUG LOG # 16272				
DCNR/DWR RECEIVED				
JUL 9 1 2006				

8. WELL CONSTRUCTION

Depth Drilled _____ Feet Depth Cased _____ Feet

HOLE DIAMETER (BIT SIZE)

From _____ To _____

_____ Inches _____ Feet _____ Feet

_____ Inches _____ Feet _____ Feet

_____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8"			1'	un known
6"		Steel lined	10'	Bottom

Perforations:
 Type perforation _____
 Size perforation _____

From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Placement Method: Pumped Poured

Gravel Packed: Yes No
 From _____ feet to _____ feet

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

Date started **July 17 2006**
 Date completed **July 24 2006**

9. WATER LEVEL

Static water level **493'** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name **WDC Exploration and Wells** Contractor
 Address **570 Centennial Way N. Las Vegas Nevada 89030** Contractor
 Nevada contractor's license number issued by the State Contractor's Board **CC 12852**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **ABDR-2317**
 Signed _____
 By driller performing actual drilling on site or contractor
 Date **July 25 2006**