WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

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

OFFICE USE ONLY
Log No. 104926
Permit No.
Basin 212

NOTICE OF INTENT NO. 34549

1. OWNER Mojave 15 LLC
MAILING ADDRESS 9755 W. Charleston Blvd.
Las vegas, NV 89117

ADDRESS AT WELL LOCATION 1601 Palm st.
Las vegas, NV 89104

2. LOCATION SE ¼ NE ¼ Sec. 1 T. 21 N/S R. 61 E. Clark County
PERMIT NO. (Issued by Water Resources) Parcel No. 16201602005 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 Auger

6. LITHOLOGIC LOG MW-7

Material	Water Strata	From	To	Thickness
4" PVC Injection well				
No water well was				
Drilled out and				
grouted to surface.				

N. 36°09'14.5"
W 115°06'04.7"

DOW/POWER RECEIVED
FEB 13 2008
LAS VEGAS OFFICE
NA083

Date started 1-29, 2008
Date completed 1-29, 2008

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

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

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

HOLE DIAMETER (BIT SIZE)

	From	To
8 Inches	0 Feet	12 Feet
Inches	Feet	Feet
Inches	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4"	PVC			

Perforations:
Type perforation
Size perforation
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

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 ____ 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 Elite Drilling Inc. (Contractor)
Address 4255 W. Post rd. (Contractor)
Las vegas, NV 89118
Nevada contractor's license number issued by the State Contractor's Board 0054931
Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-1869
Signed ____ By driller performing actual drilling on site or contractor
Date 2-11-08

(Rev. 12-01) USE ADDITIONAL SHEETS IF NECESSARY (O)-627