

003813
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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. 33531

1. OWNER SCHEIDT SANDRA RABSON TRS COLLEEN K TR ADDRESS AT WELL LOCATION _____
SCHEIDT MACQUIE
 MAILING ADDRESS P.O. Box 5015 333 E. CHARLSTON BLVD
BUENA PARK, CA. 90622-5015 LAS VEGAS NV
 2. LOCATION SW 1/4 SW 1/4 Sec. 34 T. 20 N. R. 61 E County CLARK
 PERMIT NO. 159-34-400-137 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 MS12

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>ASPHALT</u>		<u>0</u>	<u>3</u>	<u>3</u>
<u>FILL</u>		<u>3</u>	<u>1.5</u>	<u>1.2</u>
<u>SILTY CLAY</u>		<u>1.5</u>	<u>5</u>	<u>3.5</u>
<u>CLAY, SILTY CLAY</u>		<u>5</u>	<u>9</u>	<u>4</u>
<u>CALCIUM (WEAR)</u>		<u>9</u>	<u>11</u>	<u>2</u>
<u>CLAY</u>	<u>14</u>	<u>11</u>	<u>24</u>	<u>13</u>
<u>SILTY CLAY</u>		<u>24</u>	<u>36</u>	<u>12</u>

MAP DATUM W6584
Pew-2 36°09.547N 115°08.935W

FACILITY ID #
8-001049

8. WELL CONSTRUCTION
 Depth Drilled 36 Feet Depth Cased 35 Feet
 HOLE DIAMETER (BIT SIZE)
 From 1 1/2 Inches To 3 6 Feet
 _____ 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)
<u>4.25</u>		<u>SC440PK</u>	<u>35</u>	<u>0</u>

Perforations:
 Type perforation MACHING 500T
 Size perforation 6.020
 From 3.5 feet to 10 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 8' Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 36 feet to 8 feet

9. WATER LEVEL
 Static water level 14 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 5/29, 2008
 Date completed 5/29, 2008

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name ETAPIC DRILLING SERVICES LLC Contractor
 Address 7150 PLACIO ST. Contractor
LAS VEGAS NV 89119
 Nevada contractor's license number issued by the State Contractor's Board 51266
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-2272
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 6/09/18