

PRINT OR TYPE ONLY
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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. **33908**
 ADDRESS AT WELL LOCATION **2725 N. LAS VEGAS BLVD.**
LAS VEGAS NV, 89030

1. OWNER **SOUTHLAND EMP TR THOMPSON**
JOHN PTRS ETAL
 MAILING ADDRESS **P.O. BOX 711 DALLAS TX, 75221-0711**

ADDRESS AT WELL LOCATION **2725 N. LAS VEGAS BLVD.**
LAS VEGAS NV, 89030

2. LOCATION **NE 1/4 SW 1/4 Sec. 13 T 20 N/S R 61 E CLARK** County
 PERMIT NO. **139-13363 009** 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 **HSA**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
ASPHALT		.0	.25	.25
STONE+SAND BASE		.25	1.0	.75
SILTY BROWN CLAY		1.0	22.0	21.0
SILTY SANDY CLAY	YFS	22.0	28.0	6.0
SILTY CLAY+GRAVEL		28.0	40.0	12.0

MW IS
 FACILITY ID NO.
 8-000599

MAP DATUM
 WGS 84

36° 12.580 N.
 115° 06.488 W.

8. WELL CONSTRUCTION
 Depth Drilled **40** Feet Depth Cased **40** Feet
 HOLE DIAMETER (BIT SIZE)
 From **12** Inches To **40** Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4		SC4 40	0	40

Perforations:
 Type perforation **MACHINE SLOT**
 Size perforation _____
 From **15** feet to **40** feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal **15**
 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From **13** feet to **40** feet

9. WATER LEVEL
 Static water level **22** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started **8-12**, 20**08**
 Date completed **8-12**, 20**08**

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

RECEIVED
 AUG 28 2008
 LAS VEGAS OFFICE

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name **EAGLE DRILLING SERVICES LLC.**
 Contractor
 Address **7150 PLACID ST LAS VEGAS NV 89119**
 Contractor
 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 **2357**
 Signed **Meryl Wikstrom**
 By driller performing actual drilling on site or contractor
 Date **8-22-2008**