

COPIES TO
 - DIVISION OF WATER RESOURCES
 - CLIENT'S COPY
 - WELL DRILLER'S COPY

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. **106783**
 Permit No. _____
 Basin **212**
 NOTICE OF INTENT NO. **33942**

PRINT OR TYPE ONLY

1. OWNER **CLARK COUNTY SANITATION** ADDRESS AT WELL LOCATION **CCWRD #567**
 MAILING ADDRESS **5857 E FLAMINGO RD. LAS VEGAS, NV 89122** **5857 East Flamingo Road, Las Vegas, NV**

2. LOCATION **NE 1/4 NE 1/4 Sec 22 T 21 S R 62 E** **CLARK** County
 PERMIT NO. **DW1281** **161-22-101-001** **CLARK**
Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other _____
 4. PROPOSED USE **DEWATER**
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock
 5. WELL TYPE
 Cable Rotary RVC
 Air Other **Auger**

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thick-ness |
|-------------------------|--------------|------|-----|------------|
| 12-Dewater wells | | | | |
| Silt | x | 0 | 12' | 12' |
| Silty-clay | x | 12 | 35' | 23 |
| wells 19 to 30 | | | | |
| WSG84 | | | | |
| N36 06 660' | | | | |
| W115 10 628' | | | | |

8. WELL CONSTRUCTION

Depth Drilled **35** Feet Depth Cased **35** Feet

HOLE DIAMETER (BIT SIZE)

| From | To |
|------------------|------------------------------|
| 24 Inches | 0 Feet 35 Feet |
| _____ Inches | _____ Feet _____ Feet |
| _____ Inches | _____ Feet _____ Feet |

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|-----------|
| 14 | 36.71 | 0.250 | 0 | 35 |

Perforations:
 Type perforation **Machine**
 Size perforation **1/4"x2.5"x21 per ft.**

| From | To |
|-------------------|----------------|
| 10 feet to | 35 feet |
| _____ feet to | _____ feet |
| _____ feet to | _____ feet |
| _____ feet to | _____ feet |
| _____ feet to | _____ feet |

Surface Seal: Yes No Seal Type:
 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From **0** feet to **35** feet

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

Date started **8/26, 20 2008**
 Date completed **9/22, 20 2008**

7. WELL TEST DATE

| 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 **ALLEN DRILLING INC.**
(CONTRACTOR)
 Address **4015 WEST TOMPKINS AVE.**
(CONTRACTOR)
LAS VEGAS, NV 89103
 Nevada contractor's license number issued by the State Contractor's Board **0018916 & 0018917**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2231**
 Signed *Vista Allen*
 By driller performing actual drilling on site or contractor
 Date **September 30, 2008**

DCNR/DWR RECEIVED
OCT 08 2008
LAS VEGAS OFFICE