

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

STATE OF NEVADA  
 DIVISION OF WATER RESOURCES  
**WELL DRILLER'S REPORT**

OFFICE USE ONLY  
 Log No. **107153**  
 Permit No. \_\_\_\_\_  
 Basin **212**

PRINT OR TYPE ONLY

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

NOTICE OF INTENT NO. **33961**

1. OWNER **NEVADA PROPERTY 1 LLC** ADDRESS AT WELL LOCATION **3708 S. LAS VEGAS BLVD.**  
 MAILING ADDRESS **300 S Fourth St. #1700** **LAS VEGAS, NV**  
**Las Vegas, NV 89101**

2. LOCATION **SE 1/4 NE 1/4 Sec 20 T 21 S R 61 E** **CLARK** County

PERMIT NO. **DW1220A** **162-20-603-007**  
 Issued by Water Resources Parcel No. \_\_\_\_\_ Division 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 \_\_\_\_\_

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<b>Plug 4-Dewater wells</b>				
<b>Depth 75'</b>				
<b>Casings 14"</b>				
<b>Excavate near bottom cut off and cement in last 10' of pipe.</b>				
<b>Filled with 1.5 yards of 9 sack cement grout in each well.</b>				
<b>WGS</b>				
<b>N36 06 496</b>				
<b>W115 10 488</b>				

8. WELL CONSTRUCTION

Depth Drilled \_\_\_\_\_ Feet Depth Cased \_\_\_\_\_ Feet

HOLE DIAMETER (BIT SIZE)

Inches	Feet	Feet	Feet
From _____	To _____	From _____	To _____
_____	_____	_____	_____
_____	_____	_____	_____

CASING SCHEDULE

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

Perforations:

Type perforation \_\_\_\_\_  
 Size perforation \_\_\_\_\_

From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type: \_\_\_\_\_  
 Depth of Seal \_\_\_\_\_  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

9. WATER LEVEL

Static water level \_\_\_\_\_ **12** 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.

Date started **11/26**, 20 **08**  
 Date completed **11/26**, 20 **08**

7. WELL TEST DATE

TEST METHOD:  Bailer  Pump  Air Lift  
 Draw Down (Feet Below Static) \_\_\_\_\_ Time (Hours) \_\_\_\_\_

**DCNR/DWR RECEIVED**  
**DEC 03 2008**

Name **ALLEN DRILLING INC.**  
 (CONTRACTOR)

Address **4015 WEST TOMPKINS AVE.**  
**LAS VEGAS, NV 89103**  
 (CONTRACTOR)

Nevada contractor's license number issued by the State Contractor's Board **18916 & 18917**

Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1301HPDEL22343**

Signed *Timothy Wiley*  
 By driller performing actual drilling on site or contractor

Date **11/28/08**