

003809
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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. **33909**

1. OWNER **CV PROPCO LLC** ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS **1505 Pavilion Center 2nd Flr** **3680 W. TROPICANA AVE**
LOS VEGAS NV **LAS VEGAS NV 89103**
 2. LOCATION **SW 1/4 SW 1/4 Sec. 20 T. 21 N. R. 61 E. CLARK** County
 PERMIT NO. **162-20-401-009** Parcel No. _____ Subdivision Name _____
 Issued by Water Resources _____

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 **MSA**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
ASPHALT		0	0.3	0.3
TYPE-4		0.3	1	0.7
Silty SAND w/ GRAVEL		1	9	8
Caliche		9	11	2
Silty CLAY		11	18	7
Caliche		18	18.5	0.5
Silty SAND	21.5	18.5	24	5.5
Silty CLAY		24	37	13

Map Datum **WGS 84**
 mw-6 **36° 06.077' N 115° 11.323' W**
 Facility ID # **8-0001807**

8. WELL CONSTRUCTION
 Depth Drilled **37** Feet Depth Cased **3.5** Feet
 HOLE DIAMETER (BIT SIZE)
 From **11 1/2** Inches To **37** Feet
 _____ Inches _____ Feet
 _____ Inches _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4.5		SC440PVC	0	35

Perforations:
 Type perforation **MACHINE SCOT**
 Size perforation **1/2"**
 From **3.5** feet to **10** feet
 From _____ feet to _____ feet
 From _____ feet to _____ 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 **37** feet to **8** feet

9. WATER LEVEL
 Static water level **21.5** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **WARM** °F Quality _____

Date started **8/29**, 20 **08**
 Date completed **8/29**, 20 **08**

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name **EMERL DRILLING SERVICES LLC** Contractor
 Address **7150 PLACID 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 **8/29/08**