

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

OFFICE USE ONLY  
Log No. **107982**  
Permit No. \_\_\_\_\_  
Basin \_\_\_\_\_

PRINT OR TYPE ONLY  
DO NOT WRITE ON BACK

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

NOTICE OF INTENT NO. **34245**

1. OWNER **FBF INC.** ADDRESS AT WELL LOCATION **3283 N. LAS VEGAS BLVD.**  
MAILING ADDRESS **1401 S. LAS VEGAS BLVD.** **LAS VEGAS NV. 89032**  
**LAS VEGAS NV. 89104** Subdivision Name: \_\_\_\_\_ County: **CLARK**

2. LOCATION **SE 1/4 SW 1/4 Sec 7 T 20 N SR 62 E** Latitude **36° 13.05' 09"** UTM E  NAD 27  
PERMIT/WAIVER No. **140-07-403-002** Longitude **115° 05' 37.49"** N  NAD 83/WGS 84

Issued by Water Resources Parcel No. \_\_\_\_\_

3. WORKED PERFORMED  
 New Well  Replace  Recondition  
 Deepen  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
<b>NW18</b>				
<b>ASPHALT</b>		<b>0</b>	<b>25</b>	<b>25</b>
<b>STONE FILL</b>		<b>25</b>	<b>25</b>	<b>0</b>
<b>BROWN SILTY CLAY</b>		<b>25</b>	<b>48</b>	<b>23</b>
<b>MOIST BROWN SILTY CLAY</b>	<b>YES</b>	<b>48</b>	<b>65</b>	<b>17</b>
<b>FACILITY ID NO.</b>				
<b>8-000 251</b>				

9. WELL CONSTRUCTION

Depth Drilled	Feet	Depth Cased	Feet
<b>8</b>	<b>0</b>	<b>65</b>	

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet
<b>8</b>	<b>0</b>	<b>65</b>	

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>2</b>		<b>SC4 40</b>	<b>0</b>	<b>50</b>

Perforations:

Type of perforation **MACHINE SCOT**  
Size of perforation **.020**

From	feet to	feet
<b>30</b>	<b>50</b>	

Annular Seal:  Yes  No

Material	to	to	Pumped	Poured
<input type="checkbox"/> Neat Cement			<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Cement Grout			<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Concrete Grout	<b>0</b>	<b>1</b>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
<input checked="" type="checkbox"/> ≥30% Bentonite Grout	<b>1</b>	<b>26</b>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured

Gravel Pack:  Yes  No **28** to **50**  Pumped  Poured  
Type: **NO 3**

Bentonite Chips:  Yes  No **50** to **65**  Pumped  Poured  
Type: **SEAL 26-28**

Date started: **2-12**, 20 **09**  
Date completed: **2-12**, 20 **09**

7. Water Level  
Static water level: **48** 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.

Name **EAGLE DRILLING INC.** 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 **M. J. W. [Signature]**  
By driller performing actual drilling on-site or contractor  
Date **2-16-2009**

8. WELL TEST DATA

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

**DCNR/DWR RECEIVED**  
**FEB 25 2009**