

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

OFFICE USE ONLY
Log No. **108975**
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. **34916**

1. OWNER **S. gardens Company LP** ADDRESS AT WELL LOCATION **Same as Owner**
MAILING ADDRESS **3051 Kishner Dr.** **MW-20**
Las Vegas, NV, 89109 Subdivision Name: _____ County: **clark**

2. LOCATION **NE 1/4 SE 1/4 Sec 9 T 21S N/S R 61 E** Latitude **36. 08'04.99"N** UTM E NAD 27
PERMIT/WAIVER No. **162-09-703-005** Longitude **115. 09'30.67"** N NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

3. WORKED PERFORMED 4. PROPOSED USE 5. WELL TYPE
 New Well Replace Recondition Domestic Irrigation Test Cable Rotary RVC
 Deepen Other Municipal/Industrial Monitor Stock Air Other auger

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Fill		0	2	2
Sandy Clay		2	6	4
Caliche		6	8	2
Sandy Clay		8	9	1
Clayey Sand		9	10	1
Caliche		10	12	2
Silty Sand		12	17	5
Clayey Sand		17	19	2
Sandy Clay		19	22	3
Lean Clay		22	31	
Caliche		31	33	2
Clayey Gravel		33	34	

9. WELL CONSTRUCTION

Depth Drilled **34** Feet Depth Cased **34** Feet

HOLE DIAMETER (BIT SIZE)

From	To	From	To
8	0	0	34
Inches	Feet	Feet	Feet
Inches	Feet	Feet	Feet
Inches	Feet	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2.375	.70	Sch 40	0	34

Perforations:

Type of perforation **factory slotted**
Size of perforation **.020**

From **19** feet to **34** feet
From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement _____ to _____ Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: Yes No **17** to **34** Pumped Poured
Type: **# 3 Silica**

Bentonite Chips: Yes No **4** to **17** Pumped Poured
Type: **3/8 chips**

Date started: **6-May**, 20 **09**
Date completed: **9-May**, 20 **09**

7. Water Level
Static water level: **29.9** feet below land surface
Artesian Flow: **n/a** G.P.M. **n/a** P.S.I.
Water Temperature: **n/a** °F
Quality: **good**

8. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

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

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name **WDC Exploration & wells**
Contractor

Address **570 corinthian way**
Contractor

N Las Vegas 89030

Nevada contractor's license number
issued by the State Contractor's Board **0012852**

Nevada driller's license number issued by the
Division of Water Resources, the on-site driller **2057**

Signed **[Signature]**
By driller performing actual drilling on site or contractor

Date **6-1-09**