

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

OFFICE USE ONLY
 Log No. 109835
 Permit No. _____
 Basin 162

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. 33095

1. OWNER Allman NV Enterprises
 MAILING ADDRESS 540 E. St. Louis Street
Las Vegas, NV 89104

2. LOCATION NW 1/4 SW 1/4 Sec. 16 T 20S
 PERMIT NO. 36-332-08 Issued by Water Resources Parcel No. _____

ADDRESS AT WELL LOCATION
771 W. Irons 36D 12.614N 116D 01.701W NAD 83/WGS 84

N/S R 53E E Nye County
Cal Vegas Ranchos Subdivision Name

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 _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>brown clay</u>		<u>0</u>	<u>34</u>	<u>34</u>
<u>See next line</u>	<u>x</u>	<u>34</u>	<u>115</u>	<u>81</u>
<u>brown clay with caleche strings</u>				
<u>brown caleche</u>	<u>x</u>	<u>115</u>	<u>121</u>	<u>6</u>
<u>See next line</u>	<u>x</u>	<u>121</u>	<u>177</u>	<u>56</u>
<u>brown clay with caleche strings</u>				
<u>brown caleche</u>	<u>x</u>	<u>177</u>	<u>180</u>	<u>3</u>
<u>See next line</u>	<u>x</u>	<u>180</u>	<u>200</u>	<u>20</u>
<u>brown clay with caleche strings</u>				

8. WELL CONSTRUCTION
 Depth Drilled 200 Feet Depth Cased 200+1 Feet

HOLE DIAMETER (BIT SIZE)
 From _____ To _____
11 Inches 0 Feet 200 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 5/8</u>	<u>3.7</u>	<u>.280</u>	<u>0</u>	<u>200</u>

Perforations:
 Type perforation sawcut
 Size perforation _____

From 180 feet to 200 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 50 _____
 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From 50 feet to 200 feet

DCNR/DWR
RECEIVED
 JAN 19 2010
LAS VEGAS OFFICE

Date started 6/30/2009 _____ 19____
 Date completed 6/30/2009 _____ 19____

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			

9. WATER LEVEL
 Static water level 68 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cool °F Quality good

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Strickland Construction Co., Inc. Contractor
 Address 5801 S. Homestead Contractor
Pahrump, NV 89048
 Nevada contractor's license number issued by the State Contractor's Board 40277
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2086

Signed _____
 By driller performing actual drilling on-site or contractor
 Date 6-30-09