

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

OFFICE USE ONLY
 Log No. 111235
 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. 32465

1 OWNER GEO SUMMIT LLC.
 MAILING ADDRESS 1431 S. LAS VEGAS BLVD.
LAS VEGAS NV.

ADDRESS AT WELL LOCATION 1431 S. LAS VEGAS BLVD.
LAS VEGAS NV.

Subdivision Name: _____ County: CLARK

2 LOCATION SE 1/4 NW 1/4 Sec 3 T 21 N/S R 61 E
 PERMIT/WAIVER No. 16203202004

Latitude 36° 09' 12.37 UTM E _____ NAD 27
 Longitude 115° 09' 00.73 N _____ NAD 83/WGS 84

3 TYPE OF WELL
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock

Is this well being plugged because a
 replacement well was drilled? NO
 If yes, what is replacement well NOI? _____

Is there an existing well log? NO
 If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION
 Depth Drilled 25 Feet Depth Cased 25 Feet

7 WELL PLUGGING PROCEDURE
 Was well cleaned out to total depth? yes no

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2"		SCH 40	0	25

If well was not cleaned out to total depth, please explain why: _____

Existing Perforations:
 Type of perforation MACHINE SLOT
 Size of perforation .020
 From 5 feet to 25 feet
 From _____ feet to _____ feet

Was the well contaminated? yes no
 Was the casing pulled? yes no
 Was the casing over drilled? yes no

If casing was left in place, please show where additional perforations were made:
 Additional Perforations:
 Type of perforator used: NONE
 From _____ feet to _____ feet Number of perfs per linear foot _____
 From _____ feet to _____ feet Number of perfs per linear foot _____
 From _____ feet to _____ feet Number of perfs per linear foot _____
 From _____ feet to _____ feet Number of perfs per linear foot _____
 From _____ feet to _____ feet Number of perfs per linear foot _____
 From _____ feet to _____ feet Number of perfs per linear foot _____

5 WATER LEVEL
 Static water level 19.7 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

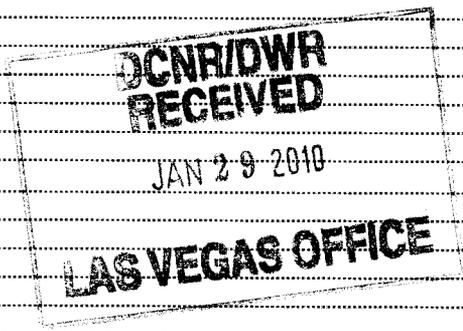
8 WELL PLUGGING MATERIALS

6 Additional Notes or Comments
FACILITY ID. NO. 8-000966
MW 4

Material Used					
From <u>6"</u> feet to <u>25'</u> feet	<u>CEMENT GROUT</u>	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured		
From <u>0"</u> feet to <u>6"</u> feet	<u>ASPHALT</u>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured		
From _____ feet to _____ feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured		
From _____ feet to _____ feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured		
From _____ feet to _____ feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured		
From _____ feet to _____ feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured		

Neat Cement Fluid Weight 94 lbs/gal 5-2
 Bentonite Grout _____ % bentonite

Date Started 1-25-2010
 Date Completed 1-25-2010



9 DRILLER'S CERTIFICATION
 This well was plugged and abandoned under my supervision and the report is true
 to the best of my knowledge.

Name EAGLE DRILLING
 Contractor
 Address 7150 PLACID ST LAS VEGAS
 Contractor 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 2357

Signed Neil J. Walker
 By driller performing actual drilling on-site or contractor
 Date 1-27-2010