

Original Well Drilled
under Well log # 72334

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

OFFICE USE ONLY
Log No. 111314
Permit No. 64704
Basin 212

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

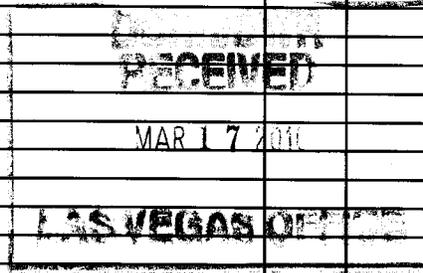
Please complete this form in its entirety in
accordance with NRS 534.170 and NAC 534.340

1. OWNER VALLEY WATER DIST. W121 ADDRESS AT WELL LOCATION 8551 W GOWAN LAS VEGAS NV
MAILING ADDRESS 1001 S VALLEY VIEW BLVD LAS VEGAS

2. LOCATION SE 1/4 SE 1/4 Sec 8 T 20S N/S R 60 E Latitude UTM E 654663.44 NAD 27
PERMIT/WAIVER No. 64704 138-08-701-013 Longitude N 4009690 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 Monitor Municipal/Industrial Stock
5. WELL TYPE Cable Rotary RVC Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
BUSH & BAIL WELL				
300 FT TO 1110 FT				
SONAR JET WELL				
380 FT TO 580				
625 FT TO 700 FT				
745FT TO 1120 FT				
				

9. WELL CONSTRUCTION

Depth Drilled 1140 Feet Depth Cased 1140 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To
<u>24</u>	<u>0</u>	<u>1140</u>

CASING SCHEDULE

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

Perforations:

Type of perforation _____
Size of perforation _____

From _____ feet to _____ 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 _____ to _____ Pumped Poured
Type: _____
Bentonite Chips: Yes No _____ to _____ Pumped Poured
Type: _____

Date started: 29-Dec, 2009
Date completed: 2/11/10, 2010

7. Water Level

Static water level: _____ feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ °F
Quality: _____

8. WELL TEST DATA

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

10. DRILLER'S CERTIFICATION

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

Name LAS VEGAS VALLEY WATER DIST.
Contractor

Address 1001 S VALLEY VIEW BLVD. LAS VEGAS NV,
Contractor

Nevada contractor's license number _____
issued by the State Contractor's Board N/A

Nevada driller's license number issued by the _____
Division of Water Resources, the on-site driller 1594

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

Date 3/16/2010