

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

OFFICE USE ONLY
Log No. **111843**
Permit No. _____
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

NOTICE OF INTENT NO. **35380**

1. OWNER **Tronox LLC c/o Tax Department**
MAILING ADDRESS **P.O. Box 268859**
Oklahoma City, OK 73126

ADDRESS AT WELL LOCATION **8000 E. Lake Mead Parkway**
M-162
Henderson, NV 89015

Subdivision Name: _____ County: **Clark**

2. LOCATION **NW ¼ SE ¼ Sec 12 T 22 N 62 E** Latitude **36.0256.19N** UTM E NAD 27
PERMIT/WAIVER No. **178-12-701-001** Longitude **115.0008.98W** 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 Sonic

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Brown Sand Gravelly		0	17	17
Brown Sand		17	35	18
Tan Brown Silt		35	52	17
Tan brown Silt Sandy		52	74	22
Clay Silty		74	75	1
Silt and Sandy Silt		75	110	35

9. WELL CONSTRUCTION

Depth Drilled **110** Feet Depth Cased **110** Feet

HOLE DIAMETER (BIT SIZE)

From	To
6 Inches	0 Feet 110 Feet
Inches	Feet
Inches	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2.250	.64	.125	0	110

Perforations:

Type of perforation **Factory Slotted**

Size of perforation **.010**

From **100** feet to **110** feet

From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement **0** to **96** Pumped Poured

Cement Grout _____ to _____ Pumped Poured

Concrete Grout _____ to _____ Pumped Poured

≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: Yes No **98** to **110** Pumped Poured

Type: **10/20 Silica**

Bentonite Chips: Yes No **96** to **98** Pumped Poured

Type: **1/4 Pellets**

Date started: **20-May**, 20 **10**

Date completed: **20-May**, 20 **10**

7. Water Level

Static water level: **18.1** 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: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
NA		

DCNR/DWR RECEIVED

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, N. Las Vegas, NV 89030**
Contractor

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 **M-2371**

Signed _____
By driller performing actual drilling on site or contractor

Date **6/17/2010**

LAS VEGAS OFFICE