

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

OFFICE USE ONLY
Log No. 112530
Permit No. _____
Basin 210

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 Bank Community Nevada McDonald Carano Wilson LLP ADDRESS AT WELL LOCATION No Address NOTICE OF INTENT NO. 35577

MAILING ADDRESS 2300 W. Sahara Ave #1000 Las Vegas, NV. 89102 Subdivision Name: _____ County: Clark

2. LOCATION SE 1/4 SE 1/4 Sec 10 T 21 N R 62 E Latitude N 36.1187° UTM E NAD 27
PERMIT/WAIVER No. MD2862 Parcel No. 161-16-801-001 Longitude W 115.0499° N NAD 83/WGS 84

3. WORKED PERFORMED New Well Replace Recondition Deepen Other
4. PROPOSED USE Domestic Irrigation Test Stock Municipal/Industrial Monitor

5. WELL TYPE Cable Rotary RVC Other Air

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>Fill Clayey Sand</u>		<u>0</u>	<u>1</u>	<u>1</u>
<u>Silty Sand</u>		<u>1</u>	<u>4</u>	<u>3</u>
<u>Clayey Sand</u>		<u>4</u>	<u>7</u>	<u>3</u>
<u>Silty Sand</u>	<u>W</u>	<u>7</u>	<u>10</u>	<u>3</u>
<u>Sandy Clay</u>		<u>10</u>	<u>15</u>	<u>5</u>

9. WELL CONSTRUCTION

Depth Drilled 15 Feet Depth Cased 15 Feet

HOLE DIAMETER (BIT SIZE)

From	To
<u>6</u> Inches	<u>0</u> Feet <u>15</u> Feet
_____ Inches	_____ Feet _____ Feet
_____ Inches	_____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2 sch 40 PUC</u>	<u>ASTM F-490</u>	<u>0</u>	<u>0</u>	<u>15</u>

Perforations:

Type of perforation Factory Slots

Size of perforation 8287

From 5 feet to 15 feet

From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement _____ to _____ Pumped Poured

Cement Grout _____ to _____ Pumped Poured

Concrete Grout 0 to 1 Pumped Poured

≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: Yes No 94 to 15 Pumped Poured

Type: #12 Silica Sand

Bentonite Chips: Yes No 4 to 4 Pumped Poured

Type: 3g Bentonite Hole Plug

DCNR/DWR
RECEIVED
SEP 27 2010

LAS VEGAS OFFICE

Date started: 9-8 20 10
Date completed: 9-9 20 10

7. Water Level
Static water level: 9.3 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ °F
Quality: _____

8. 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			

NA

10. DRILLER'S CERTIFICATION

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

Name Elite Drilling Inc. Contractor

Address 4255 W. Post Rd. Contractor

Las Vegas NV. 89118

Nevada contractor's license number 54931

issued by the State Contractor's Board

Nevada driller's license number issued by the M-1944

Division of Water Resources, the on-site driller

Signed Roman M. Beall
By driller performing actual drilling on-site or contractor

Date 9/20/10