

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

OFFICE USE ONLY
Log No. 112534
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. 32381

1. OWNER Tronox LLC
MAILING ADDRESS PO Box 268859
Oklahoma City, OK 73126-8859

ADDRESS AT WELL LOCATION East of 4th Street & South of Warm Springs Rd
Subdivision Name: _____
County: Clark

2. LOCATION NE 1/4 SW 1/4 Sec 12 T 22 N R 62 E
PERMIT/WAIVER No. 17812-301-003

Latitude 36.02.829 UTM E NAD 27
Longitude -115.00.370 N NAD 83/WGS 84

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 Robo Sonic

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>Sand</u>		<u>0</u>	<u>20</u>	<u>20</u>
<u>Gravel</u>		<u>20</u>	<u>42</u>	<u>22</u>
<u>Caliche</u>		<u>42</u>	<u>46</u>	<u>4</u>
<u>Silly Sand</u>	<u>X</u>	<u>46</u>	<u>120</u>	<u>74</u>
<u>Silly Clay</u>		<u>120</u>	<u>150</u>	<u>30</u>

9. WELL CONSTRUCTION

Depth Drilled 150 Feet Depth Cased 119 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
<u>9</u>	<u>0</u>	<u>150</u>		

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4.5</u>	<u>10.8</u>	<u>.237</u>	<u>0</u>	<u>96</u>
<u>4.5</u>	<u>10.8</u>	<u>.237</u>	<u>116</u>	<u>119</u>

Perforations:
Type of perforation Factory Slot
Size of perforation .010
From 96 feet to 116 feet

Annular Seal: Yes No
 Neat Cement 2 to 8.8 Pumped Poured
 Cement Grout to to Pumped Poured
 Concrete Grout 0 to 2 Pumped Poured
 ≥30% Bentonite Grout to to Pumped Poured

Gravel Pack: Yes No 93 to 119 Pumped Poured
Type: 10-20

Bentonite Chips: Yes No 119 to 150 Pumped Poured
Type: 3/8 Chips 88 93

Date started: 10-14, 20 10
Date completed: 10-17, 20 10

7. Water Level
Static water level: 43 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"/> Bailor <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Boart Longyear Company
Address 7773 W Seldon Ln
Peoria, Az 85345
Nevada contractor's license number 0010157
issued by the State Contractor's Board
Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-2147
Signed [Signature]
By driller performing actual drilling on site or contractor
Date 11-17-10

OCNR/DWR
RECEIVED

NOV 19 2010

LAS VEGAS OFFICE