

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

OFFICE USE ONLY
Log No. 113606
Permit No. _____
Basin 1103

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 JOHN & PEGGY ELLENBURG ADDRESS AT WELL LOCATION NICKEL AV. & PAWNEE ST.
MAILING ADDRESS P.O. BOX 95704 LAS VEGAS NV
89193 Subdivision Name: _____ County: CLARK

2. LOCATION SE 1/4 Sec 26 T 24 N R 56 E Latitude 35° 49' 490 UTM E NAD 27
PERMIT/WAIVER No. 200-26-801-028 Longitude 115° 39' 421 N NAD 83/WGS 84

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 Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>SANDY LOAM</u>		<u>0</u>	<u>2</u>	<u>2</u>
<u>CALICHE</u>		<u>2</u>	<u>4</u>	<u>2</u>
<u>CLAY</u>		<u>4</u>	<u>28</u>	<u>24</u>
<u>CALICHE</u>		<u>28</u>	<u>38</u>	<u>10</u>
<u>CLAY</u>		<u>38</u>	<u>56</u>	<u>18</u>
<u>CALICHE</u>		<u>56</u>	<u>61</u>	<u>5</u>
<u>CLAY</u>		<u>61</u>	<u>74</u>	<u>13</u>
<u>CALICHE</u>	<u>W.B.</u>	<u>74</u>	<u>80</u>	<u>6</u>
<u>CLAY</u>		<u>80</u>	<u>91</u>	<u>11</u>
<u>CALICHE</u>	<u>W.B.</u>	<u>91</u>	<u>103</u>	<u>12</u>
<u>CLAY</u>		<u>103</u>	<u>116</u>	<u>13</u>
<u>CALICHE</u>	<u>W.B.</u>	<u>116</u>	<u>120</u>	<u>4</u>

9. WELL CONSTRUCTION

Depth Drilled 120 Feet Depth Cased 120 Feet

HOLE DIAMETER (BIT SIZE)

From	To	Feet	Feet
<u>12 1/4</u> Inches	<u>0</u> Feet	<u>120</u> Feet	

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 7/8</u>	<u>4.33</u>	<u>PVC SCH 40 - 3/16</u>	<u>0</u>	<u>120</u>

Perforations:

Type of perforation SAW CUT
Size of perforation 5" INCH BY 6" INCH 4 ROW

From 120 feet to 80 feet
From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement to _____ Pumped Poured
 Cement Grout to _____ Pumped Poured
 Concrete Grout 50 FT. to SURFACE Pumped Poured
 ≥30% Bentonite Grout to _____ Pumped Poured

Gravel Pack: Yes No 120 to 50 Pumped Poured
Type: 3/8" INCH PEA GRAVEL

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

Date started: 3-25 20 11
Date completed: 3-25 20 11

7. Water Level
Static water level: 65 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: COOL °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 BUDGET DRILLING CO Contractor
Address P.O. BOX 3505 PATHEM NV Contractor
89041
Nevada contractor's license number _____
issued by the State Contractor's Board 40020
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1573

Signed [Signature]
By driller performing actual drilling on-site or contractor
Date 3-28-2011