

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

OFFICE USE ONLY
 Log No. 114274
 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. **35461A**

1. OWNER **DOUGLAS & CHARLOTTE SEIP TTEES** ADDRESS AT WELL LOCATION **9590 MULE DEER DR**
 MAILING ADDRESS **HCR 33 BOX 3010**
LAS VEGAS, NV 89161-9251

2. LOCATION **SE 1/4 SW 1/4 Sec. 20 T 22 N/S R 58 E CLARK** County
 PERMIT NO. **174-20-402-011** Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition Other **PLUG**
 Deepen Abandon

4. PROPOSED USE
 Domestic Irrigation Test Municipal/Industrial Monitor Stock

5. WELL TYPE
 Cable Rotary RVC
 Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
N36°00'59.6"				
W115°30'01.3"				
DID NOT PREFORATE--WAIVER # R-1523				
PUMPED 109 CU FT OF NEAT CEMENT WITH 4% BENTONITE THROUGH 1-1/4" TRIMIE PIPE FROM BOTTOM UP USING GROUT PUMP.				

8. WELL CONSTRUCTION
 Depth Drilled **200** Feet Depth Cased **200** Feet

HOLE DIAMETER (BIT SIZE)
 EXISTING From **0** Feet To **200** Feet
 Inches Feet Feet
 Inches Feet Feet
 Inches Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8	16.94	.188	0	200

Perforations:
 Type perforation **EXISTING**
 Size perforation **EXISTING**

From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal _____ Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level **93** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name **GREAT BASIN DRILLING CO. OF NEVADA, INC.**
 Contractor

7. WELL TEST DATA

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

DCNR/DWR RECEIVED
JUL 29 2011

Address **1220 MANSE RD** Contractor
PAHRUMP, NV. 89048
 Nevada contractor's license number issued by the State Contractor's Board **47333**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1642**
 Signed *[Signature]*
 By driller performing actual drilling on-site or contractor
 Date **7/27/2011**

USE ADDITIONAL SHEETS IF NECESSARY

LAS VEGAS OFFICE