

COPIES TO  
 - DIVISION OF WATER RESOURCES  
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STATE OF NEVADA  
 DIVISION OF WATER RESOURCES  
**WELL DRILLER'S REPORT**

OFFICE USE ONLY  
 Log No. 114579  
 Permit No. \_\_\_\_\_  
 Basin 212

PRINT OR TYPE ONLY

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. **36005**

1. OWNER **Santa Barbara Palms LP**  
 MAILING ADDRESS **2655 S. Rainbow Blvd. #401**  
**Las Vegas, NV 89146**

ADDRESS AT WELL LOCATION **4880 Santa Barbara Street**  
**Las Vegas, NV**

2. LOCATION SE 1/4 SE 1/4 Sec 19 T 21 S R 62 E **Clark** County

PERMIT NO. **161-19-803-001**  
 Issued by Water Resources Parcel No. \_\_\_\_\_

3. WORK PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Abandon  Other \_\_\_\_\_

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

5. WELL TYPE  
 Cable  Rotary  RVC  
 Air  Other **Auger**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Plug 1-40' Dewater well				
Pulled casing and poured 1.25 yards of 27 sack cement slurry from bottom to surface.				
Waiver# DW-1321				
WSG84				
N36 06. 108'				
W115 05. 013'				
DCNR/DWR RECEIVED				
NOV 21 2011				
LAS VEGAS OFFICE				

8. WELL CONSTRUCTION  
 Depth Drilled 40 Feet Depth Cased 40 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From \_\_\_\_\_ To \_\_\_\_\_  
24 Inches \_\_\_\_\_ Feet 40 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 CASING SCHEDULE  

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>14</b>	<b>37</b>	<b>1/4</b>	<b>0</b>	<b>40</b>

Perforations:  
 Type perforation **Machine**  
 Size perforation **1/4"**  
 From \_\_\_\_\_ 20 feet to \_\_\_\_\_ 40 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 \_\_\_\_\_ 0 feet to \_\_\_\_\_ 40 feet

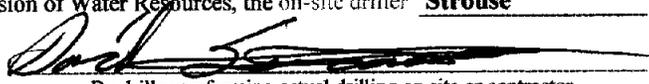
9. WATER LEVEL  
 Static water level \_\_\_\_\_ **10** feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name **ALLEN DRILLING INC.**  
 (CONTRACTOR)

Date started 10/25, 20 11  
 Date completed 11/11, 20 11

7. WELL TEST DATE

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

Address **4015 WEST TOMPKINS AVE.**  
 (CONTRACTOR)  
**LAS VEGAS, NV 89103**  
 Nevada contractor's license number issued by the State Contractor's Board **0018916 & 0018917**  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **ABDS2161-David Strouse**  
 Signed   
 By driller performing actual drilling on site or contractor  
 Date **November 17, 2011**