

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

OFFICE USE ONLY
Log No. 119003
Permit No. _____
Basin 215

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. 34561

1. OWNER U.S.A. ADDRESS AT WELL LOCATION _____
MAILING ADDRESS Washington D.C. Subdivision Name: _____ County: Clark

2. LOCATION NE 1/4 SE 1/4 Sec 22 T 17 N R 68 E Latitude N. 36° 26' 15.7" UTM E NAD 27
PERMIT/WAIVER No. 07800002001 Longitude W 114° 22' 19.7" N NAD 83/WGS 84
Issued by Water Resources Parcel No. Facility ID No. NEV 50016

3. WORKED PERFORMED New Well Replace Recondition Deepen Other
4. PROPOSED USE Domestic Municipal/Industrial Irrigation Test Monitor Stock
5. WELL TYPE Cable Rotary RVC Other

Material	Water Strata	From	To	Thick-ness
<u>FUL GRAVELLY SAND</u>		<u>0</u>	<u>16</u>	<u>16</u>
<u>SAND w/ sd. gravel</u>		<u>16</u>	<u>25</u>	<u>9</u>
<u>CALICHE</u>		<u>25</u>	<u>27 1/2</u>	<u>2 1/2</u>
<u>SAND w/ gravel</u>		<u>27 1/2</u>	<u>30</u>	<u>2 1/2</u>
<u>SANDY GRAVEL</u>		<u>30</u>	<u>38</u>	<u>8</u>
<u>SILTY CLAY</u>		<u>38</u>	<u>55</u>	<u>17</u>
<u>SAND w/ SILT</u>		<u>55</u>	<u>70 1/2</u>	<u>15 1/2</u>
<u>SANDY GRAVEL</u>		<u>70 1/2</u>	<u>76</u>	<u>5 1/2</u>
<u>CALICHE</u>		<u>76</u>	<u>77 1/2</u>	<u>1 1/2</u>
<u>SANDY GRAVEL</u>		<u>77 1/2</u>	<u>81 1/2</u>	<u>4</u>
<u>SANDY CLAY</u>		<u>81 1/2</u>	<u>83</u>	<u>1 1/2</u>
<u>CLAYEY GRAVEL</u>		<u>83</u>	<u>84</u>	<u>1</u>
<u>SANDY CLAY</u>		<u>84</u>	<u>86</u>	<u>2</u>
<u>CLAYEY GRAVEL</u>		<u>86</u>	<u>89</u>	<u>3</u>
<u>SANDY GRAVEL</u>		<u>89</u>	<u>91 1/2</u>	<u>2 1/2</u>
<u>CALICHE</u>		<u>91 1/2</u>	<u>97 1/2</u>	<u>6</u>
<u>SILTY SAND</u>		<u>97 1/2</u>	<u>103</u>	<u>5 1/2</u>
<u>CLAYEY SAND</u>		<u>103</u>	<u>113</u>	<u>10</u>
<u>CALICHE</u>		<u>113</u>	<u>123</u>	<u>10</u>
<u>SILT SAND occas. clay layer</u>		<u>123</u>	<u>137</u>	<u>14</u>
<u>Clay - occas. sm sand layer</u>		<u>123</u>	<u>146</u>	<u>23</u>
<u>SAND w/ SILT</u>		<u>146</u>	<u>149</u>	<u>3</u>
<u>SILTY CLAY w/ sm layers</u>		<u>149</u>	<u>160</u>	<u>11</u>
<u>NO Water encountered</u>				

9. WELL CONSTRUCTION
Depth Drilled 160 Feet Depth Cased 147.5 Feet
HOLE DIAMETER (BIT SIZE)
From 0 To 160
8 Inches 0 Feet 160 Feet
Inches Feet Feet
Inches Feet Feet

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4"</u>	<u>ASTM F-480</u>	<u>sch. 40</u>	<u>0</u>	<u>147.5</u>

Perforations:
Type of perforation Factory Slots
Size of perforation .020"
From 97.5 feet to 147.5 feet
From _____ feet to _____ feet

Annular Seal: Yes No
 Neat Cement 1 to 7 Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout 0 to 93.5 Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: Yes No 95.5 to 147.5 Pumped Poured
Type: #3 Monterey Silica
Bentonite Chips: Yes No 95.5 to 92.5 Pumped Poured
Type: 3/8 Hole Plug

Date started: 4-9, 20 08
Date completed: 4-9, 20 08

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

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			

NO Water
DENR/DWR RECEIVED
APR 24 2008

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.
Address 4255 W. Post Rd. Las Vegas NV 89119

Signature: _____
Date: _____
Deny Log - Send Back.

NOTICE OF INTENT

No. 34561

Today's Date: 4/4/08

Intended Start Date: 4/9/08

Type of Work to be Done: Drilling: Deepening: Reconditioning: Plugging:

Is this a replacement well? Yes No If there is an existing well, what is the well log number? _____

Proposed use of well: Monitoring Diameter of well: 4 inches Number of wells: 1

If this well is a domestic well, is it located within a water purveyors service area? Yes No If yes, what is the DOM waiver: _____

If this is a monitor well required by another government agency, what is the facility ID number? NEY 50016

If this well is being completed under a waiver please provide the corresponding waiver number: _____

If a water right is associated with this well, what is the permit number? _____

Location of the well by Public Land Survey: NE 1/4 SE 1/4 Sec. 33 T 26 N R 62 E

Latitude: _____ UTM E 201031.25 NAD 27

Longitude: _____ or UTM N 98627.39 NAD 83/WGS 84

Address at well location: None

Assessor Parcel Number: 226 00 002 015

County: Clark Subdivision Name: _____

Name of Client: USA

Address of Client: Washington D.C.

Contractor's License Number: 54931 On-Site Drillers License Number: M1944

Company Name and Address: Elite Drilling Inc. 4255 W Post Rd. L.V., NV, 89118

Need Log Forms Need Intent Cards

(Rev. 04-07)

Driller's Signature: Donald Beall