

WFLI.D
mwoy

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

OFFICE USE ONLY
Log No. 122265
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. 34751

1. OWNER Nevada Express Trust
MAILING ADDRESS 35 E Wacker DR. 1550
Chicago IL 60601

ADDRESS AT WELL LOCATION 501 S Fourth St Henderson
Nevada
Subdivision Name: Blackstone Ind. Complex County: Clark

2. LOCATION NW 1/4 SE 1/4 Sec 12 T 22 N R 62 E
PERMIT/WAIVER No. MO-3034 178-12-701-004
Issued by Water Resources Parcel No. _____

Latitude 36.0470052° N Longitude -115.0024132° W
TM E NAD 27
JN 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
 Other Helium Storage

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
gravel sand		0	5	5
Sandy Gravel		5	10	5
Sandy Gravel		10	15	5
Coarse sand		15	20	5
Silty sand		20	25	5
Silty sand Gravel	X	25	30	5
Silty clay	X	30	32	2

9. WELL CONSTRUCTION

Depth Drilled 32' Feet Depth Cased 32' Feet

HOLE DIAMETER (BIT SIZE)

From	To
<u>8</u> Inches	<u>0'</u> Feet <u>32</u> Feet
_____ Inches	_____ Feet _____ Feet
_____ Inches	_____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2</u>		<u>sch 40</u>	<u>0</u>	<u>32</u>

Perforations:

Type of perforation slotted
Size of perforation 0.20

From 32 feet to 22 feet
From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement _____ to _____ Pumped Poured
 Cement Grout 18 to 3 Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: Yes No 32 to 21 Pumped Poured
Type: 2/12 sand

Bentonite Chips: Yes No 21 to 18 Pumped Poured
Type: medium bentonite chips

Date started: March 23, 20 15
Date completed: March 23, 20 15

7. Water Level
Static water level: 24 feet below land surface
Artesian Flow: N/A G.P.M. N/A P.S.I.
Water Temperature: N/A °F
Quality: N/A

8. WELL TEST DATA

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			

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Wisborne Contractor
Address gress Drilling 2726 W. LUTHER AVE. S. #1111
90765

Nevada contractor's license number issued by the State Contractor's Board 0038113
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2435-M

Signed [Signature]
By driller performing actual drilling on-site or contractor
Date 3-26-15

(Rev. 05-06)

USE ADDITIONAL SHEETS IF NECESSARY

36.0470271
-115.0015865
NAD
27