

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

OFFICE USE ONLY
Log No. 122270
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. 37451

1. OWNER Newman resource trust ADDRESS AT WELL LOCATION Sol. S. East St. Henderson
MAILING ADDRESS 35 E. Wacker Dr 1550 NV
Ch. 4450 IL 60001 Subdivision Name: Black and red complex County: Clark

2. LOCATION N 1/4 SE 1/4 Sec 12 T 22 N R 6 E Latitude 36.0469804 N UTM E NAD 27
PERMIT/WAIVER No. MO-3034 178-12-701-04 Longitude -115.0019546 W N NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Sand & gravel		0	5	5
Sand & gravel, rocks		5	10	5
Coarse sand, gravel		10	15	5
Sand, some gravel		15	20	5
Coarse sand		20	25	5
Silty sand, moist	X	25	30	5
Silty clays, wet	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	

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 .020

From 0 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: 1/12 sand

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

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: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name W. S. Torres Contractor
Address 2776 Walnut Ave SE Small Hill CA 90755 Contractor

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