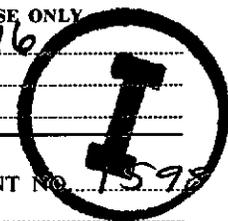


OFFICE USE ONLY
 Log No. 27076
 Permit No. _____
 Basin 212


WELL DRILLERS REPORT

Please complete this form in its entirety

PRINT OR TYPE ONLY

NOTICE OF INTENT No. 1598

1. OWNER Kim Cheskey ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS _____
 2. LOCATION SE 1/4 SE 1/4 Sec. 33 T. 19 N/S R. 60 E CLARK County
 PERMIT NO. _____ Issued by Water Resources Parcel No. _____ Subdivision Name _____

3. TYPE OF WORK
 New Well Recondition
 Deepen Other
 4. PROPOSED USE
 Domestic Irrigation Test
 Municipal Industrial Stock
 5. TYPE WELL
 Cable Rotary
 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Clay		0	12	12
Caliche		12	19	7
Br. lime		19	50	31
Hard Caliche		50	90	40
Br. lime		90	101	11
Caliche		101	115	14
Clay + Gravel		115	400	285

8. WELL CONSTRUCTION
 Diameter hole 12 1/4 inches Total depth 400 feet
 Casing record 0-400
 Weight per foot _____ Thickness 1.56

Diameter	From	To
<u>8 5/8</u> inches	<u>0</u> feet	<u>400</u> feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet
_____ inches	_____ feet	_____ feet

 Surface seal: Yes No Type CMT
 Depth of seal 50 feet
 Gravel packed: Yes No
 Gravel packed from 50' feet to 400 feet
 Perforations:
 Type perforation factory
 Size perforation _____
 From 360 feet to 400 feet
 From _____ feet to _____ feet

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 JUN 12 1985
 Div. of Water Resources
 Branch Office - Las Vegas, NV

Date started 6-5- 19 85
 Date completed 6-7- 19 85

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump

9. WATER LEVEL
 Static water level 171 feet below land surface
 Flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ ° F. Quality _____

10. DRILLERS CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Lee R. Thomas Contractor
 Address 5965 N. MAVERICK Contractor
 Nevada contractor's license number 10831
 Nevada contractor's drillers number 623
 Nevada driller's license number 623 Actual Driller
 Signed Lee R. Thomas Contractor
 Date 6-11-85

BAILER TEST
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours
 G.P.M. _____ Draw down _____ feet _____ hours