

WELL DRILLER'S REPORT

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

Log No. 1549
Permit No. 23710
Basin CAL-NEV

OFFICE USE ONLY

NOTICE OF INTENT NO. 23710

1. OWNER CAL-NEV PIPELINE Co. ADDRESS AT WELL LOCATION CAL-NEV
MAILING ADDRESS % CONVERSE CONSULTANTS 5049 N. SUDAN LANE
4670 S POLARIS AV, LV, NV 89103 LAS VEGAS, NV
2. LOCATION SW 1/4, NW 1/4 Sec 34 T 19 N 30R 62 E CLARK County
PERMIT NO. MO-2258 Parcel No. _____ Subdivision Name _____

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other _____

4. PROPOSED USE
 Domestic Municipal/Industrial
 Irrigation Test Stock
 Monitor Air Other: ADJACER

5. WELL TYPE
 Cable Rotary RVC
 Other: ADJACER

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
SANDY SILT		0	29	29
CLAYEY GRAVEL		29	31	2
CLAYEY SILT		31	44	13
CLAYEY SILT		44	46	2
SANDY SILT		46	53	7
SILT CLAY		53	84	31
CEMENTED CLAY		84	86	2
SILT CLAY		86	127	41

8. WELL CONSTRUCTION

Depth Drilled..... Feet Depth Cased..... Feet

HOLE DIAMETER (BIT SIZE)
 From _____ To _____
8 Inches _____ Feet 127 Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2"</u>	<u>.7165</u>	<u>SC4</u>	<u>40</u>	<u>0</u>
				<u>127</u>

Perforations: FACTORY SLOTTED

Type perforation 0.020"
 Size perforation 125 feet to 127 feet
 From..... feet to..... feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Depth of Seal 0-122/120-122 BENT. Cement GROUT
 Placement Method: Pumped Concrete GROUT
 Poured

Gravel Packed: Yes No
 From..... 122 feet to..... 127 feet

9. WATER LEVEL

Static water level 118 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 RICHARD LEBLANC
 Address: 4670 S POLARIS AV
LAS VEGAS, NV 89103
 Contractor



Nevada contractor's license number _____
 Issued by the State Contractor's Board _____
 Nevada driller's license number issued by the
 Division of Water Resources, the on-site driller M-1817

Signed _____
 By driller performing actual drilling on site or contractor
 Date 6-18-93

7. WELL TEST DATA

Date started MAY 21 1993
 Date completed MAY 21 1993

TEST METHOD:	Bailer	Pump	Air Lift
G.P.M. (Feet Below Static)			
Time (Hours)			