

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. 41550
Permit No. _____
Basin _____

NOTICE OF INTENT NO. 23711

ADDRESS AT WELL LOCATION: CAL-NEW

1. OWNER: CAL-NEW PIPELINE Co.

MAILING ADDRESS % CONVERSE CONSULTANTS

5049 N. SLOAN LANE

4670 S. FOLBES AV, LV, NV 89103

LAS VEGAS, NV

2. LOCATION: SUD 1/4 NW 1/4 Sec 34 T 19 N OR 62 E CLARK County

PERMIT NO. MO-2258

Parcel No.

Subdivision Name

3. WORK PERFORMED
 New Well
 Replace
 Deepen
 Abandon
 Recondition
 Other
 4. Domestic
 Municipal/Industrial
 Monitor
 Stock
 5. WELL TYPE
 Test
 Cable
 Rotary
 RVC
 Air
 Other: ADDER

LITHOLOGIC LOG			WELL CONSTRUCTION					
Material	Water Strata	From	To	Thickness	Depth Drilled	Feet	Depth Cased	Feet
SANDY SILT		0	19	19	128		128	
GAUGE		19	19.5	0.5				
SANDY SILT		19.5	25	5.5				
CLAYEY SILT		25	34	9				
GAUGE		34	34.5	0.5				
SILTY CLAY		34.5	44	9.5				
GAUGE		44	46	2				
SILTY CLAY		46	54	8				
CLAY		54	128	74				

WELL CONSTRUCTION			
Depth Drilled	Feet	Depth Cased	Feet
128		128	

HOLE DIAMETER (BIT SIZE)			
Inches	Feet	Inches	Feet
8		128	

CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2"	7.1lb	SQA 40	0	128

Performations: FACTORY SLOTTED
 Type perforation: 0.020"
 Size perforation: 126 feet to 128 feet
 From: 126 feet to 128 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 128 feet

9. WATER LEVEL
 Static water level: 107 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
 Contractor
 Address: 4670 S. FOLBES AV.
 Contractor
LAS VEGAS, NV 89103
 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



Date started: MAY 26 1993
 Date completed: MAY 26 1993
 7. WELL TEST DATA
 TEST METHOD: Bailor Pump Air Lift
 G.P.M. (Feet Below Static) _____ Time (Hours) _____

Signed: [Signature]
 By driller performing actual drilling on site or contractor
 Date: 5-18-93