WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

OFFICE USE ONLY
Log No. 43290
Permit No.
Basin 212

NOTICE OF INTENT NO. 12120

1. OWNER DESERT GOLD FOOD COMPANY
MAILING ADDRESS 123 WEST COLORADO ST.
LAS VEGAS, NV 89102

ADDRESS AT WELL LOCATION
1300 S. COMMERCE ST
LAS VEGAS NV 89102

2. LOCATION NE ¼ NE ¼ Sec. 4 T. 21 N/S R. 61 E. CLARK County

PERMIT NO. ____ Issued by Water Resources | 041-280-004 Parcel No. | Subdivision Name

3. WORK PERFORMED
☐ New Well ☐ Replace ☐ Recondition
☐ Deepen ☒ Abandon ☐ Other

4. PROPOSED USE
☐ Domestic ☐ Irrigation ☐ Test
☐ Municipal/Industrial ☒ Monitor ☐ Stock

5. WELL TYPE
☐ Cable ☐ Rotary ☐ RVC
☒ Air ☐ Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
MW-3				
ABANDONED 0 TO 20 FEET				
GROUTED TO SURFACE				

RECEIVED
OCT 21 1993
Div. of Water Resources
Branch Office - Las Vegas, NV

Date started OCTOBER 15, 1993
Date completed OCTOBER 15, 1993

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

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

8. WELL CONSTRUCTION
Depth Drilled ____ Feet Depth Cased ____ Feet

HOLE DIAMETER (BIT SIZE)
From To
____ Inches ____ Feet ____ Feet
____ Inches ____ Feet ____ Feet
____ Inches ____ Feet ____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)

Perforations:
Type perforation
Size perforation
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: ☐ Yes ☐ No
Depth of Seal
Placement Method: ☐ Pumped ☐ Poured
Seal Type: ☐ Neat Cement ☐ Cement Grout ☐ Concrete Grout
Gravel Packed: ☐ Yes ☐ No
From ____ feet to ____ feet

9. WATER LEVEL
Static water level ____ 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 CONVERSE CONSULTANTS SW
Contractor
Address 4670 S. POLARIS
Contractor
LAS VEGAS, NV 89103

Nevada contractor's license number issued by the State Contractor's Board 0034757
Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-1589

Signed [signature]
By driller performing actual drilling on site or contractor
Date OCTOBER 15, 1993

(Rev. 3-91) USE ADDITIONAL SHEETS IF NECESSARY (O)-627