

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. 43457
 Permit No. 59311-T
 Basin. 212

12/1/93

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

NOTICE OF INTENT NO. 12/1/93

1. OWNER Max Riggs Construction ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS _____
 2. LOCATION SE 1/4 SE 1/4 Sec. 19 T. 19 N. 62 E. CLARK County _____
 PERMIT NO. 59311-T Issued by Water Resources 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	Thick-ness
sand & gravel		0	60	60
cemented gravel		60	210	150
dark grey limestone		210	415	205
partially cemented gravel		415	549	134
gravel congl.	X	549	621	72
blue grey limestone		621	662	41
cemented congl.		662	699	37
dark grey & black rock		699	750	51

Insufficient water abandon well so there's no casing

SEE LOG # 43458

8. WELL CONSTRUCTION
 Depth Drilled 750 Feet Depth Cased 0 Feet
 HOLE DIAMETER (BIT SIZE)
 From 0 To 750
10 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

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Depth of Seal _____
 Placement Method: Pumped Poured
 Poured

Gravel Packed: Yes No
 From _____ feet to _____ feet

RECEIVED
 JAN 19 1994
 Div. of Water Resources
 Branch Office - Las Vegas, NV

Date started 11-8, 1993
 Date completed 11-24, 1993

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
8		

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 ALLEN DRILLING, INC. Contractor
 Address 4847 SO. VALLEY VIEW
LAS VEGAS, NV. 89103
 Nevada contractor's license number 0018919
 issued by the State Contractor's Board
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1376
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 1-12-94