

OFFICE USE ONLY
 Log No. 45148
 Permit No. 212
 Basin 212

NOTICE OF INTENT NO. 12395

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

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

1. OWNER RICHIE CLYNE ADDRESS AT WELL LOCATION LV Blvd No.
 MAILING ADDRESS _____
 2. LOCATION NE 1/4 NW 1/4 Sec. 26 T. 19 N/S R. 62 E CLARK County _____
 PERMIT NO. _____ 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
<u>SANDY CLAY, GRAVEL + ROCKS.</u>		<u>0</u>	<u>20</u>	<u>20</u>
<u>SANDY CLAY + GRAVEL.</u>		<u>20</u>	<u>180</u>	<u>160</u>
<u>SANDY CLAY + GRAVEL W/ STRKS SAND.</u>		<u>250</u>	<u>180</u>	<u>350</u>
<u>SANDY CLAY + GRAVEL W/ STRKS OF CALICHE SAND</u>		<u>350</u>	<u>440</u>	<u>90</u>
		<u>440</u>	<u>450</u>	<u>10</u>

8. WELL CONSTRUCTION
 Depth Drilled 450 Feet Depth Cased 450 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
<u>14 3/4</u>	<u>0</u>	<u>60</u>	<u>0</u>	<u>60</u>
<u>12 1/4</u>	<u>60</u>	<u>450</u>	<u>60</u>	<u>450</u>

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8 7/8</u>	<u>16.94</u>	<u>1.88</u>	<u>+1</u>	<u>450</u>

Perforations:
 Type perforation FACTORY SAW
 Size perforation 1 7/8 x 2 1/2

From 382 feet to 430 feet
 From _____ feet to _____ feet

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

Depth of Seal 50

Placement Method: Pumped Poured

Gravel Packed: Yes No
 From 50 feet to 450 feet

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 Branch Office - Las Vegas, NV

9. WATER LEVEL
 Static water level 150 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 8-13, 1994
 Date completed 8-16, 1994

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Name DESERT DRILLING Contractor
 Address 6475 GARY AVE Contractor
LAS VEGAS, NV. 89139

Nevada contractor's license number issued by the State Contractor's Board 34274
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1594

Signed Timothy Couch
 By driller performing actual drilling on site or contractor
 Date 8-19-94