

OFFICE USE ONLY
 Log No. 45789
 Permit No. _____
 Basin. 212

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

NOTICE OF INTENT NO. 12395

1. OWNER SEA Co ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 3021 S. Valley View Hwy 3716 S. PARADISE
LU NV 89103

2. LOCATION NW 1/4 SW 1/4 Sec. 15 T 21 N 36 E Clark County _____
 PERMIT NO. MO-2399A 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 TOG

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thickness |
|-------------------------|--------------|-----------|-----------|-----------|
| <u>CLAY</u> | | <u>0</u> | <u>8</u> | |
| <u>CLAY</u> | | <u>8</u> | <u>10</u> | |
| <u>CLAY WITH SINE</u> | | | | |
| <u>SAND</u> | | <u>10</u> | <u>14</u> | |
| <u>CLAY WITH SINE</u> | | | | |
| <u>Cementing gravel</u> | | | | |
| <u>SAND</u> | | <u>14</u> | <u>16</u> | |
| <u>CLAY W/SAND</u> | | <u>16</u> | <u>20</u> | |

8. WELL CONSTRUCTION
 Depth Drilled 20 Feet Depth Cased 20 Feet

HOLE DIAMETER (BIT SIZE)
 From 0 To 20
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) |
|--------------------|---------------------|-------------------------|-------------|-----------|
| <u>4.5</u> | <u>PVC</u> | <u>SCH 40</u> | <u>0</u> | <u>5</u> |

Perforations:
 Type perforation S 1/4 to 1/2 screen
 Size perforation 0.20
 From 5 feet to 20 feet
 From _____ feet to _____ feet

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

Depth of Seal 3

Placement Method: Pumped
 Poured

Gravel Packed: Yes No
 From 4 feet to 20 feet

RECEIVED
 SEP 15 1994
 Div. of Water Resources
 Branch Office - Las Vegas, NV

Date started 6-27, 1994
 Date completed 6-27, 1994

7. WELL TEST DATA

| TEST METHOD: | G.P.M. | Draw Down (Feet Below Static) | Time (Hours) |
|---|--------|-------------------------------|--------------|
| <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift | | | |

9. WATER LEVEL
 Static water level 17 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 Wesley Environment Contractor
 Address 4301 S. Valley View Hwy Contractor
LU NV 89103
 Nevada contractor's license number issued by the State Contractor's Board 0035839
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-1847
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 9-1-94