

STATE OF NEVADA
 DIVISION OF WATER RESOURCES
 WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. **50535**
 Permit No. _____
 Basin **212**

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

NOTICE OF INTENT NO. **16275**

1. OWNER UNION PACIFIC RAILROAD
 MAILING ADDRESS 1416 DODGE ST
OMAHA, NE 68179
 ADDRESS AT WELL LOCATION FORMER UPRR
YARD

2. LOCATION NW 1/4 NW 1/4 Sec. 34 T. 20 N. R. 61 E. CLARK County
 PERMIT NO. MO 2587 41-14
 Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other _____

4. PROPOSED USE WATER - 55
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock

5. WELL TYPE
 Cable Rotary RVC
 Air Other Auger

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>FILL</u>		<u>0</u>	<u>3.5</u>	<u>3.5</u>
<u>SANDY SILT</u>		<u>3.5</u>	<u>4.5</u>	<u>1</u>
<u>CLAY, TAN</u>		<u>4.5</u>	<u>6</u>	<u>1.5</u>
<u>CLAY, WHITE</u>		<u>6</u>	<u>9</u>	<u>3</u>
<u>CALICHE</u>		<u>9</u>	<u>12</u>	<u>3</u>
<u>CLAY, WHITE</u>		<u>12</u>	<u>14</u>	<u>2</u>
<u>CALICHE</u>		<u>14</u>	<u>17</u>	<u>3</u>

8. WELL CONSTRUCTION
 Depth Drilled 17 Feet Depth Cased 17 Feet

HOLE DIAMETER (BIT SIZE)
 From To
8 Inches 0 Feet 17 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2.375</u>	<u>0.64</u>	<u>0.154</u>	<u>0</u>	<u>17</u>

Perforations:
 Type perforation FACTORY SLOT
 Size perforation 0.010
 From 7 feet to 17 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 0.3' / 3.5' BENTONITE Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From 5 feet to 17 feet

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

Date started 8-28, 1995
 Date completed 8-28, 1995

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 THOMAS HIGH Contractor
 Address 731 PILOT RD STE H
LAS VEGAS NV 89119 Contractor
 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: 41869
 Signed Thomas R. High
 By driller performing actual drilling on site or contractor
 Date 12-11-95