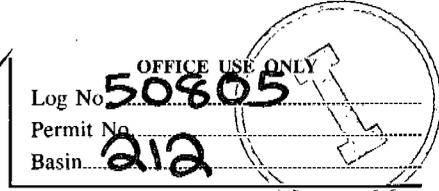


WELL DRILLER'S REPORT

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



PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

NOTICE OF INTENT NO. 9354

1. OWNER HCA ADDRESS AT WELL LOCATION 3201 W. TROPICANA AVE
 MAILING ADDRESS 4170 S. DELATOR
LV NV 89103

2. LOCATION NE 1/4 NW 1/4 Sec. 8 T 21 N 61 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 Auger

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
CLAY		0	8	
CALICHE		8	12	
CLAY w/ some gravels		12	28	
CLAY w/ some fines		28	40	

8. WELL CONSTRUCTION
 Depth Drilled 40 Feet Depth Cased 40 Feet

HOLE DIAMETER (BIT SIZE)
 From 8 Inches To 0 Feet 40 Feet
 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>2.5</u>	<u>PVC</u>	<u>SCH 40</u>	<u>0</u>	<u>20</u>

Perforations:
 Type perforation Slotted Screen
 Size perforation .020
 From 20 feet to 40 feet
 From feet to feet
 From feet to feet
 From feet to feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 18 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From 20 feet to 40 feet

9. WATER LEVEL
 Static water level 22 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 WEBER ENVIRONMENTAL INC. Contractor
 Address 4301 S. Valley View 221 Contractor
LV NV 89103
 Nevada contractor's license number issued by the State Contractor's Board 0039528
 Nevada driller's license number issued by the Division of Water Resources the on-site driller M. 1487
 Signed [Signature] By driller performing actual drilling on site or contractor
 Date 10-12-95

Date started 5-4, 1995
 Date completed 5-7, 1995

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			