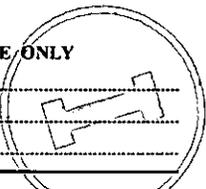


OFFICE USE ONLY
 Log No. 51396
 Permit No. _____
 Basin 212



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. 17906

1. OWNER STERLING S. DEVELOPMENT ADDRESS AT WELL LOCATION MARYLAND PKWY + SILVARADO RANCH
 MAILING ADDRESS _____

2. LOCATION SW 1/4 SW 1/4 Sec 23 T 22 N 61 E CLARK County _____
 PERMIT NO. 177-23-301-001 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>CLEANED FILL</u>				
<u>W/ AIR FOAM</u>				
<u>FROM SURFACE</u>				
<u>TO 270' RIPPED</u>				
<u>CASING W/ MILLS</u>				
<u>KNIFE AND FILLED</u>				
<u>W/ NEAT CEMENT FROM</u>				
<u>270' TO SURFACE.</u>				

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

HOLE DIAMETER (BIT SIZE):
 From _____ To _____
 _____ 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

Gravel Packed: Yes No
 From _____ feet to _____ 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 4-23 1996
 Date completed 4-23 1996

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			

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name WATER WELL SERVICES Contractor
 Address 6475 GARY AVE Contractor
LAS VEGAS, NV. 89139
 Nevada contractor's license number issued by the State Contractor's Board: 022311
 Nevada driller's license number issued by the Division of Water Resources, the onsite driller: 1966
 Signed Pyndall Couch
 By driller performing actual drilling on site or contractor
 Date 4-23-96

