

OFFICE USE ONLY
 Log No. 58152
 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. 17566

1. OWNER S.R.K. ADDRESS AT WELL LOCATION 3065 Shendaw St., Las Vegas, NV
 MAILING ADDRESS 1755 Plum Lane Suite 241 Reno, NV 89502

2. LOCATION NW 1/4 SW 1/4 Sec. 8 T. 21 N. 61 E. Clark County
 PERMIT NO. NV-2739 Issued by Water Resources Parcel No. 162-08-302-016 Subdivision Name _____

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

4. PROPOSED USE M-3
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock

5. WELL TYPE
 Cable Rotary RVC
 Air Other Auger

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>Asphalt</u>		<u>0</u>	<u>.4</u>	<u>.4</u>
<u>Basenock</u>		<u>.4</u>	<u>1</u>	<u>.6</u>
<u>Silty Sand w/clay lenses</u>		<u>1</u>	<u>17.5</u>	<u>16.5</u>
<u>Caliche</u>		<u>17.5</u>	<u>18</u>	<u>0.5</u>

8. WELL CONSTRUCTION
 Depth Drilled 18 Feet Depth Cased 18 Feet

HOLE DIAMETER (BIT SIZE)
 From 8 Inches To 18 Feet
 From 0 Feet To 18 Feet
 From _____ Inches To _____ Feet
 From _____ Inches To _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2.375</u>	<u>.7</u>	<u>.218</u>	<u>0</u>	<u>18</u>

Perforations:
 Type perforation slotted
 Size perforation .01" - .02"
 From (.01) 3 feet to 13 feet
 From (.02) 13 feet to 18 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal 1.5
 Placement Method: Pumped Poured
 Gravel Packed: Yes No 1' of bentonite placed between
 From 2.5 feet to 18 feet

9. WATER LEVEL
 Static water level 212 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 7/30, 19 96
 Date completed 7/30, 19 96

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 Thomas High Contractor
 Address 731 Pilot Rd. Suite 4 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 M1869
 Signed _____ By driller performing actual drilling on site or contractor
 Date 10/13/96