

OFFICE USE ONLY
 Log No. 66791
 Permit No. 212
 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. 13762

1. OWNER JIM HANLEY ADDRESS AT WELL LOCATION 65 W. LAKE MEAD DR. HENDERSON, NV
 MAILING ADDRESS 85 W. LAKE MEAD DR. HENDERSON, NV
 2. LOCATION SE 1/4 NW 1/4 Sec 18 T 22 N R 63 E CLARK County
 PERMIT NO. MO-2393A Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition Deepen Abandon Other
 4. PROPOSED USE MW-1
 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>SILTY SAND With Gravel</u>		<u>0'</u>	<u>8'</u>	<u>8'</u>
<u>CEMENTED GRAVELLY SAND</u>		<u>8'</u>	<u>9'</u>	<u>1'</u>
<u>SILTY SAND</u>		<u>9'</u>	<u>21'</u>	<u>12'</u>
<u>SILTY SAND With Gravel</u>		<u>21'</u>	<u>44'</u>	<u>23'</u>
<u>CLAYEY SAND With Gravel</u>		<u>44'</u>	<u>54'</u>	<u>10'</u>
<u>SANDY CLAY</u>		<u>54'</u>	<u>92'</u>	<u>38'</u>

8. WELL CONSTRUCTION
 Depth Drilled 92.0 Feet Depth Cased 92.0 Feet
 HOLE DIAMETER (BIT SIZE)
 From 8 Inches To 92.0 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>92</u>

Perforations:
 Type perforation Factory slot
 Size perforation .020"
 From 22.0 feet to 92.0 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type: Neat Cement
 Depth of Seal 0'-2' Cement Grout
 Placement Method: Pumped 2'-20' Concrete Grout
 Poured bentonite
 Gravel Packed: Yes No
 From 20.0 feet to 92.0 feet

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 DEC 16 1994
 Div. of Water Resources
 Branch Office - Las Vegas, NV

9. WATER LEVEL
 Static water level 82.0, 11-22-94 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started November 18, 1994
 Date completed November 18, 1994

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 4670 S. Palacios Ave. Las Vegas, NV 89103 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 1869
 Signed Thomas High
 By driller performing actual drilling on site or contractor
 Date 12-13-94