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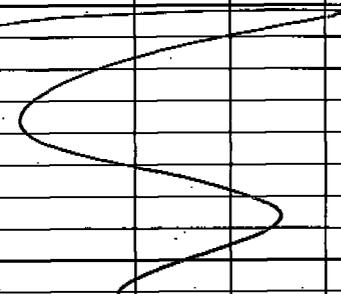
WELL DRILLER'S REPORT
 Please complete this form in its entirety in
 accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 11152

1. OWNER CITY OF LAS VEGAS ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS C/o. Converse Consultants VEGAS VALLEY Drive
LAS VEGAS NV SEWAGE TREATMENT FACILITY
 2. LOCATION NW 1/4 SW 1/4 Sec. 10 T. 21 N. R. 62 E County CLARK
 PERMIT NO. MO-2108 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 Abandon

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<p>WELL ABANDONED</p> 				

8. WELL CONSTRUCTION
 Depth Drilled _____ Feet Depth Cased _____ Feet
 HOLE DIAMETER (BIT SIZE)
 From 8 Inches To 24 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<p>WELL ABANDONED</p>				

Perforations:
 Type perforation _____
 Size perforation _____
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 0-24 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 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 _____

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Don Wilson Contractor
 Address 4670 S. Polaris Ave
LAS VEGAS, Nevada 89103
 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 M1589
 Signed Don Wilson
 By driller performing actual drilling on site or contractor
 Date 8-13-92

Date started May 19, 1992
 Date completed May 19, 1992

7. WELL TEST DATA
 TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<p>RECEIVED</p> <p>AUG 13 1992</p>		
Div. of Water Resources Branch Office - Las Vegas, NV		