

PRINT OR TYPE ONLY
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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. 16804

1. OWNER Las Vegas Paving ADDRESS AT WELL LOCATION On McLeod @
 MAILING ADDRESS 4420 S Decatur Ramos McLeod
LV NV 89103

2. LOCATION S 1/4 N 1/2 Sec 13 & 24 T. 21 NSR 6 E County _____
 PERMIT NO. DW 1039 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
<u>Dry Diff. & Sand</u>		<u>0</u>	<u>2</u>	<u>2</u>
<u>Clay w/ sand</u>		<u>2</u>	<u>12</u>	<u>10</u>
<u>Clay w/ white sand</u>		<u>12</u>	<u>16</u>	<u>4</u>
<u>Clay w/ sand & gravel</u>		<u>16</u>	<u>30</u>	<u>14</u>
<u>Clay</u>		<u>30</u>	<u>35</u>	<u>5</u>

8. WELL CONSTRUCTION
 Depth Drilled 35 Feet Depth Cased 35 Feet

HOLE DIAMETER (BIT SIZE)
 From 24 Inches To 35 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8</u>	<u>PVC</u>	<u>sch 40</u>	<u>0</u>	<u>35</u>

Perforations:
 Type perforation Slot
 Size perforation 003
 From 15 feet to 35 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 0 feet to 35 feet

9. WATER LEVEL
 Static water level 27 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 61 °F Quality good

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Griffith Contract Drilling
 Address 536 E. Waiilatane
Ontario CA 91761
 Nevada contractor's license number issued by the State Contractor's Board 0031246
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-1968
 Signed _____
 Date 10-18-95
 By driller performing actual drilling on site or contractor

Date started 10-18, 1995
 Date completed 10-18, 1995

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)