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 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. 14528

1. OWNER FHM Investments ADDRESS AT WELL LOCATION Chaparral, L.V. Blvd N.
 MAILING ADDRESS L.V. NV. L.V. NV.

2. LOCATION NE 1/4 NW 1/4 Sec. 19 T. 20 N. 62 E. CLARK County
 PERMIT NO. M-2554 260-010-046,048 N/A

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 None

6. LITHOLOGIC LOG MW-2

Material	Water Strata	From	To	Thick-ness
<u>SAND/CLAY</u>		<u>0</u>	<u>11</u>	<u>11'</u>
<u>SANDY CLAY w/ GRAVEL</u>		<u>11</u>	<u>25</u>	<u>14'</u>
<u>SANDY CLAY</u>		<u>25</u>	<u>40</u>	<u>15'</u>
<u>SAND w/ GRAVEL</u>		<u>40</u>	<u>42</u>	<u>2'</u>
<u>SANDY CLAY</u>	<u>I</u>	<u>42</u>	<u>70</u>	<u>28'</u>

8. WELL CONSTRUCTION
 Depth Drilled 70 Feet Depth Cased 70 Feet

HOLE DIAMETER (BIT SIZE)
 From To
6 1/4 Inches 0 Feet 70 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"</u>	<u>-</u>	<u>-</u>	<u>0</u>	<u>70</u>

Perforations:
 Type perforation Slot
 Size perforation 0-10
 From 50 feet to 70 feet
 From _____ feet to _____ feet
 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 42 feet to 70 feet

RECEIVED
 APR 24 1995
 Div. of Water Resources
 Branch Office - Las Vegas, NV

Date started 3-13, 1995
 Date completed 3-13, 1995

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

9. WATER LEVEL
 Static water level 47 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 72.0 °F Quality TURBID

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name SCOTT DAVIS Contractor
 Address 3711 Regulus 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 M-1930
 Signed _____
 By driller performing actual drilling on site or contractor
 Date 4-4-95