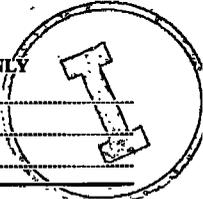


OFFICE USE ONLY  
 Log No. 68916  
 Permit No. \_\_\_\_\_  
 Basin 212



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. 13918

1. OWNER PAT CLARK PONTIAC ADDRESS AT WELL LOCATION SAME  
 MAILING ADDRESS 2575 E. SAHARA AVE  
LAS VEGAS NV  
 2. LOCATION NW 1/4 NW 1/4 Sec. 12 T. 21 N. R. 61 E. CLARK County  
 PERMIT NO. MO-2110 Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Abandon  Other \_\_\_\_\_

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

5. WELL TYPE  
 Cable  Rotary  RVC  
 Air  Other \_\_\_\_\_

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>PLUGGED WITH CEMENT GROUT (3% BENTONITE)</u>				
<u>ORIGINALLY DRILLED ON DEC 12, 1991 UNDER INTENT # 8459</u>				
<b>RECEIVED</b>				
<b>DEC 30 1994</b>				
Div. of Water Resources Branch Office - Las Vegas, NV				

8. WELL CONSTRUCTION

Depth Drilled \_\_\_\_\_ Feet Depth Cased \_\_\_\_\_ Feet

HOLE DIAMETER (BIT SIZE)

Inches	Feet	Feet
From _____	To _____	_____
_____	_____	_____
_____	_____	_____

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)

Perforations:

Type perforation \_\_\_\_\_  
 Size perforation \_\_\_\_\_

From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Neat Cement  
 Cement Grout  
 Concrete Grout

Placement Method:  Pumped  Poured

Gravel Packed:  Yes  No  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Date started Dec 8, 1994  
 Date completed Dec 8, 1994

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			

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 THOMAS HIGH Contractor  
 Address 4670 So Solaris Ave Contractor  
LAS VEGAS NV 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 M1869  
 Signed \_\_\_\_\_  
 By driller performing actual drilling on site or contractor  
 Date 12-29-94