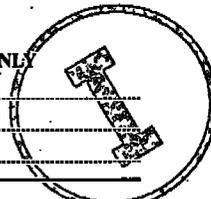


OFFICE USE ONLY
 Log No. **69665**
 Permit No. _____
 Basin **212**



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. **15605**

1. OWNER **Desert Plumbing** ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS **3333 S. Procyon Ave** **3333 S. Procyon Ave**
LV NV 89102

2. LOCATION **NW 1/4 NW 1/4 Sec. 17 T. 21 N/S R. 61 E Clark** County
 PERMIT NO. **MO-2777** **162-17-001-007** Subdivision Name _____
Issued by Water Resources Parcel No.

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 _____

6. LITHOLOGIC LOG **MW-6**

Material	Water Strata	From	To	Thickness
Fill - 8" asphalt on base		0	2	
SILTY SAND		2	3	
CALICHE		3	4	
Gravelly sand & clay		4	9	
CALICHE		9	11	
SANDY CLAY	Y	11	13.5	
CALICHE	Y	13.5	16.5	
CLAYEY Gravel & CALICHE layers	Y	16.5	26	

8. WELL CONSTRUCTION
 Depth Drilled **26** Feet Depth Cased **24 1/2** Feet

HOLE DIAMETER (BIT SIZE)
 From **6** Inches To **26** Feet
 _____ Inches _____ Feet
 _____ Inches _____ Feet
 _____ Inches _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2	PVC	sch 40	0	24 1/2

Perforations:
 Type perforation **slotted screen**
 Size perforation **0.10 inch**
 From **9 1/2** feet to **24 1/2** feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type: Neat Cement Cement Grout Concrete Grout
 Depth of Seal **8 1/2**
 Placement Method: Pumped Poured

Gravel Packed: Yes No
 From **8 1/2** feet to **26** feet

9. WATER LEVEL
 Static water level **11.08** 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 **Tim Allen** c/o Terracon Contractor
 Address **4343 S. Polaris Ave** **LV 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 **M2087**
 Signed **Kathy Ann**
 By driller performing actual drilling on site or contractor
 Date **11/10/97**



Date started **Oct 14 1997**
 Date completed **Oct 14 1997**

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			