

STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 70471
 Permit No. 212
 Basin 212

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Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 16558

1. OWNER Las Vegas Pavilion ADDRESS AT WELL LOCATION On Mt. Vista U.S. Indians
 MAILING ADDRESS 54420 S. Decatur Blvd. LV NV
 2. LOCATION SE 1/4 NE 1/4 Sec. 17, T. 21 N. R. 62 E Clark County
 PERMIT NO. DW 1078 Issued by Water Resources Parcel No. 161-R-602-001 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 Bucket

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>FI</u>		<u>0</u>	<u>3</u>	<u>3</u>
<u>Dirty sand</u>		<u>3</u>	<u>8</u>	<u>5</u>
<u>Silty sand w/ clay lump</u>		<u>8</u>	<u>28</u>	<u>20</u>
<u>Clay w/ s.s. lenses</u>		<u>28</u>	<u>40</u>	<u>12</u>

8. WELL CONSTRUCTION
 Depth Drilled 40 Feet Depth Cased 40 Feet
 HOLE DIAMETER (BIT SIZE)
 From 24 Inches 0 Feet 40 Feet
 To _____ 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>PUC</u>	<u>5/16</u>	<u>40</u>	<u>40</u>

Perforations:
 Type perforation slot
 Size perforation 003
 From 20 feet to 40 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 40
 From 0 feet to _____ feet

9. WATER LEVEL
 Static water level 11 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cool °F Quality good

Date started 1-23, 1978
 Date completed 1-23, 1978

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			

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name GD C
 Address 536 E. Mainland
Onyx A Contractor
 Nevada contractor's license number 31246
 issued by the State Contractor's Board.
 Nevada driller's license number issued by the M 1968
 Division of Water Resources, the on-site driller.
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 1-19-78

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WELL DRILLER'S REPORT

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NOTICE OF INTENT NO. 16558

1. OWNER LUP ADDRESS AT WELL LOCATION 62 E Clark
 MAILING ADDRESS 4422 S Decatur Las Vegas NV County Clark
 2. LOCATION SE 1/4 NE 1/4 Sec. 17 T. 21 N. R. 62 E County Clark
 PERMIT NO. NW 1078 Issued by Water Resources Parcel No. 161-18-600-001 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 BVC
 Air Other Bucket

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
F.U		0	3	
Sandy Silt		3	8	5
Silty Sand w/ clay lens		8	28	20
Clay w/ s.s. lens		28	40	12

8. WELL CONSTRUCTION
 Depth Drilled 40 Feet Depth Cased 40 Feet
 HOLE DIAMETER (BIT SIZE)
 From 24 Inches To 40 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8	PUC	Sch 40	0	40

 Perforations:
 Type perforation Slot
 Size perforation .003
 From 25 feet to 40 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal _____ Neat Cement
 Placement Method: Pumped Concrete Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 0 feet to 40 feet

9. WATER LEVEL
 Static water level 12 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cool °F Quality Good

Date started 1-23, 1998
 Date completed 1-23, 1998

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			

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name GDC Contractor
 Address 536 E. Mitchell Contractor
91761
 Nevada contractor's license number issued by the State Contractor's Board 31246
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-1968
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 2-19-98