

PRINT OR TYPE ONLY  
DO NOT WRITE ON BACK

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

OFFICE USE ONLY  
Log No. 71728  
Permit No. 212  
Basin I

NOTICE OF INTENT NO. 668C

1. OWNER Magic Wand  
MAILING ADDRESS 1100 E. WILSON NORTH LAS VEGAS NV 89103  
ADDRESS AT WELL LOCATION 1100 E. WILSON NORTH LAS VEGAS NV

2. LOCATION NW 1/4, SE 1/4 Sec 11, T 20, NR 61 E, Clark County  
PERMIT NO. 40-8858 Issued by Water Resources 139-11-303 011 Parcel No. Subdivision Name

3. WORK PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Abandon  Other  
4.  Domestic  Municipal/Industrial  Irrigation  Test  Monitor  Stock  Air  Other ALLIGER

5. WELL TYPE  
PROPOSED USE MULT-04 WELL TYPE  Cable  Rotary  RVC

8. WELL CONSTRUCTION  
Depth Drilled 65 Feet HOLE DIAMETER (BIT SIZE) 65 Feet  
From To

Material	Water Strata	From	To	Thick-ness
<u>Drilled out CASING/ BOREHOLE, RUBBED WITH CEMENT GROUT</u>				
<u>Well was Drilled Dec 9 1998 under INTENT # 17683</u>				

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  
From..... feet to..... feet  
From..... feet to..... feet

Surface Seal:  Yes  No Seal Type:  Neat Cement  Cement Grout  Cobercete Grout  
Depth of Seal.....  
Placement Method:  Pumped  Poured  
Gravel Packed:  Yes  No  
From..... feet to..... feet

9. WATER LEVEL  
Static water level N/A feet below land surface  
Artesian flow..... G.P.M. P.S.L.  
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 HIGLEY (Licensee (Bois))  
Address 731 RIVIERA RD STE 44 Contractor  
LAS VEGAS NV 89119

Nevada contractor's license number 0034757  
issued by the State Contractor's Board  
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 11869  
Signed Thomas Higley  
By driller performing actual drilling on site or contractor

7. WELL TEST DATA  
TEST METHOD:  Bailor  Pump  Air Lift  
G.P.M. (Feet Below Static) Time (Hours)

Date started JAN 7 1998  
Date completed JAN 7 1998