

PRINT OR TYPE ONLY  
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WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340  
 Client: SOUTHWEST GAS CORPORATION

NOTICE OF INTENT NO. 37842

Consultant: SUMMIT ENVIROSOLUTIONS

1. OWNER SUMMIT ENVIROSOLUTIONS ADDRESS AT WELL LOCATION SOUTHWEST GAS CORPORATION  
 MAILING ADDRESS 1475 Terminal Way, Suite B 250 So. Carson Street  
Reno, Nevada 89502 Carson City, Nevada 89701  
 2. LOCATION NE  $\frac{1}{4}$  NW  $\frac{1}{4}$  Sec. 29 T 15N N/S R. 20 E. Carson City County  
 PERMIT NO. M/O 701 A & B MW2 9-111-07 Carson City  
 Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED  
 New Well  Replace  Recondition  Domestic  
 Deepen  Abandon  Other.....  Municipal/Industrial  Monitor  Stock  Cable  Rotary  RVC  
 Air  Other.....

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Static Water Level: 64 ft				
Total Depth: 30 ft				
1. Measure SWL & TD				
2. Glue threaded adapter to existing casing				
3. Set tremie pipe to bottom of casing				
4. Pump neat cement from bottom to surface				
5. Pull tremie, fill casing & attach from cement pump directly to casing				
6. Pump cement @100 PSI squeezing cement through perforations into the surrounding formation				
When pressure increases, discontinue pumping				
7. Over-reamed 5 ft. & filled to ground level with concrete (2 sacks)				
Equipment:				
High pressure cement pump & mixer				
3/4" tremie pipe				
Materials:				
3/4 sack Portland Cement type II				
2 sacks concrete mix				
Location:				
25 ft. S of E half of Ben Franklin Craft Store in parking lot				

8. WELL CONSTRUCTION

Depth Drilled.....Feet Depth Cased.....Feet

HOLE DIAMETER (BIT SIZE)

From To

.....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)
<u>2 1/2</u>				

Perforations:

Type perforation.....

Size perforation.....

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

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  
 Concrete Grout

Depth of Seal.....

Placement Method:  Pumped  Poured

Gravel Packed:  Yes  No

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

Date started 2-24-98, 19.....  
 Date completed 2-24-98, 19.....

7. WELL TEST DATA

TEST METHOD:	<input type="checkbox"/> Bailer	<input type="checkbox"/> Pump	<input type="checkbox"/> Air Lift
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	

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 WAYNE DRILLING, INC. Contractor  
 Address P.O. BOX 12370 Contractor  
RENO, NEVADA 89510  
 Nevada contractor's license number issued by the State Contractor's Board.....0022549  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller.....908  
 Signed [Signature]  
 By driller performing actual drilling on site or contractor  
 Date March 5, 1998