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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

NOTICE OF INTENT NO. 37842
 ADDRESS AT WELL LOCATION SOUTHWEST GAS CORPORATION

Consultant: _____ Client: _____
 1. OWNER SUMMIT ENVIROSOLUTIONS ADDRESS AT WELL LOCATION 250 So. Carson Street
 MAILING ADDRESS 1475 Terminal Way, Suite B Carson City, Nevada 89701
Reno, Nevada 89502
 2. LOCATION NE 1/4 NW 1/4 Sec. 29 T. 15N N/S R. 20 E Carson City County
 PERMIT NO. M/O 701 A & B SVE 9-111-07 Carson City
 Issued by Water Resources Parcel No. _____ 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 _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Static Water Level: 9 feet				
Total DEPTH: 21 feet				
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 approx 3/4 sack				
5. Pull tremie, fill casing & attach from cement pump directly to casing				
6. Pump cement @100 PSI squeezing cement through perforation into surrounding formation, approx 3/4 sack When pressure increases, discontinue pumping				
Equipment: High pressure cement Pump & Mixer 3/4" dia. tremie pipe				
Materials: Approx. 1 1/2 sacks Portland Cement Type II				
Location: Approx 25 feet South of Ben Franklin Craft Store in parking lot. 1 well in a group of 14 wells Soil Vapor Extraction Wells				

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)
<u>2.00</u>				

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
 Concrete Grout

Depth of Seal _____
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From _____ feet to _____ feet

Date started 2-23-98 19____
 Date completed 2-23-98 19____

7. WELL TEST DATA

TEST METHOD: Bailer Pump 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 0022549
 issued by the State Contractor's Board
 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 2, 1998