

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

OFFICE USE ONLY
 Log No. 72288
 Permit No. _____
 Basin. 212

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

NOTICE OF INTENT NO. 17579

1. OWNER American Pacific Corp ADDRESS AT WELL LOCATION City of Henderson
 MAILING ADDRESS 3770 Howard Hughes Street Right-of-Way
#366 L.V. NO. 89107
 2. LOCATION NW 1/4 NW 1/4 Sec. 31 T. 21 N. 63 E. Clark County
 PERMIT NO. 160-31-101-001 Parcel No. _____ Subdivision Name MW-K6
 Issued by Water Resources _____

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 HSA

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>pg sand and silt</u>		<u>0</u>	<u>3</u>	
<u>Bin clay + sand w/ gravel</u>		<u>3</u>	<u>5</u>	
<u>Bin pg gravel w/clay</u>		<u>5</u>	<u>10</u>	
<u>∇</u>		<u>5</u>		
<u>Bin pg sand w/clay and gravel</u>		<u>10</u>	<u>27</u>	
<u>Bin pg gravel w/clay</u>		<u>28</u>	<u>32</u>	
<u>SAND</u>		<u>32</u>	<u>34</u>	
<u>white and pink</u>		<u>36</u>	<u>41</u>	

8. WELL CONSTRUCTION
 Depth Drilled 41 Feet Depth Cased 41 Feet
 HOLE DIAMETER (BIT SIZE)
 From 8 Inches To 0 Feet 41 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</u>		<u>sch 40</u>	<u>0</u>	<u>41</u>

Perforations:
 Type perforation machine slotted
 Size perforation 200
 From 5 feet to 41 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 2 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 2 feet to 41 feet

9. WATER LEVEL
 Static water level 2.3 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 3-12 1998
 Date completed 3-12 1998

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input checked="" 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 Geotechnical & Environmental Services Contractor
 Address 7560 W. Sahara Contractor
Las Vegas Nev. 89117
 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 _____
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 3-12-98