

Log No. **72630**  
Permit No. **212**  
Basin **212**

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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. **17581**

1. OWNER **American Pacific Corp**  
MAILING ADDRESS **3770 Howard Hughes Pkwy #366 LV NV 89107**  
ADDRESS AT WELL LOCATION **571st Street Right of Way**

2. LOCATION **NE 1/4 SW 1/4 Sec 2 T 22 N/S R 62 E** County  
PERMIT NO. **178-02-399-013**  
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 **HSA**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<b>lt brn pg gravel w/silt sand</b>		<b>0</b>	<b>4"</b>	
<b>brn pg sand w/silt + gravel</b>		<b>4"</b>	<b>6"</b>	
<b>brn pg gravel w/silt + sand boulders</b>		<b>6'</b>	<b>7'</b>	
<b>grey cem 549 cem hard</b>		<b>7'</b>	<b>10.5'</b>	
<b>dk brn pg gravel w/silt sand + cobbles Boulder</b>		<b>10.5'</b>	<b>21'</b>	
<b>ground water encounter</b>		<b>18'</b>		
<b>lt brn clayey sand</b>		<b>22'</b>		

8. WELL CONSTRUCTION  
Depth Drilled **23** Feet Depth Cased **23** Feet  
HOLE DIAMETER (BIT SIZE)  
From **6"** Inches To **23** Feet  
Inches Feet Feet Feet  
Inches Feet Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>2"</b>		<b>sch 40</b>	<b>0</b>	<b>23</b>

Perforations:  
Type perforation **machine slotted**  
Size perforation **0.20**  
From **9.5** feet to **14.5** feet  
From feet to feet  
From feet to feet  
From feet to feet

Surface Seal:  Yes  No Seal Type:  
Depth of Seal \_\_\_\_\_  Neat Cement  
Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
Gravel Packed:  Yes  No  
From **8'** feet to **14.5'** feet

9. WATER LEVEL  
Static water level **13** feet below land surface  
Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water temperature **70** °F Quality \_\_\_\_\_

Date started **2/12**, 19**98**  
Date completed **2/12**, 19**98**

7. WELL TEST DATA

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

10. DRILLER'S CERTIFICATION  
This well was drilled under my supervision and the report is true to the best of my knowledge.  
Name **Geotechnical & Env. Services** Contractor  
Address **2560 W. Sahara Las Vegas Nev. 89117** Contractor  
Nevada contractor's license number issued by the State Contractor's Board **Engineer**  
Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2044**  
Signed **[Signature]** By driller performing actual drilling on site or contractor  
Date **2-12-98**