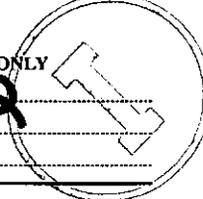


OFFICE USE ONLY  
 Log No. 75122  
 Permit No. \_\_\_\_\_  
 Basin 212



PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

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. 41409

1. OWNER Interstate Properties ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS 1000 Quail St. Suite 190 5507 Greta Lane  
Newport Beach, CA 92660 Las Vegas, NV

2. LOCATION NW 1/4 NE 1/4 Sec. 34 T. 19 N/S R. 60 E Clark County  
 PERMIT NO. 60124 125-24-502-007  
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	Thick-ness
<u>vido shows open</u>				
<u>hole 260 ft. to 346 ft.</u>				
<u>perforate casing</u>				
<u>50 ft. to 260 ft.</u>				
<u>install 2 7/8" hydrill</u>				
<u>tubing to 330 ft.</u>				
<u>pump neat cement</u>				
<u>through tubing to</u>				
<u>surface</u>				
<u>total cement</u>				
<u>9 yds.</u>				

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)

Perforations:  
 Type perforation \_\_\_\_\_  
 Size perforation \_\_\_\_\_  
 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  
 Yes  No  
 Gravel Packed: \_\_\_\_\_  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Date started 2/8/99 19\_\_\_\_  
 Date completed 3/9/99 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 Layne Christensen Company Contractor  
 Address 3515 Losee Road Contractor  
North Las Vegas, Nv 89030  
 Nevada contractor's license number issued by the State Contractor's Board 0019101  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2080  
 Signed \_\_\_\_\_  
 By driller performing actual drilling on site or contractor  
 Date 3/19/99

