

OFFICE USE ONLY
 Log No. **80288**
 Permit No. **212**
 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. **16559**

1. OWNER **Jackie Robin Sow** ADDRESS AT WELL LOCATION **6200 N. Rio Vista**
 MAILING ADDRESS **6200 N. Rio Vista Las Vegas NV 89130**

2. LOCATION **NE 1/4 NE 1/4 Sec 27 T 19 N/S R 60 E Clark** County
 PERMIT NO. **125-27-502-004** 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
Sand Gravel Clay		0	100	100
Brown Clay & Clay	5	100	300	200
Clay with layers of chert	25	300	400	100

8. WELL CONSTRUCTION
 Depth Drilled **410** Feet Depth Cased **400** Feet

HOLE DIAMETER (BIT SIZE)
 From **9 7/8** Inches To **0** Feet **410** Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 3/8		1 4/8 PVC	+1	400
8 5/8		1 8/8	+1	6

Perforations:
 Type perforation **Saw**
 Size perforation **1/8 x 1 x 3**
 From **320** feet to **400** feet
 From _____ feet to _____ feet

Post-it® Fax Note 7671 Date **5-14-03** # of pages **1**

To **Bill** From **Sheryl**
 Co./Dept. **Clark Co.** Co. **N D W R**
 Phone # Phone #
 Fax # Fax #

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Depth of Seal **50**
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From **50** feet to **400** feet

9. WATER LEVEL
 Static water level **180** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **60.1** °F Quality **good**

Date started **6-12-2000**, 19____
 Date completed **6-15-2000**, 19____

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
30		30 MIN

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name **Redding Drilling** Contractor
 Address **3955 Blue Diamond Rd #4** Contractor
h v n v 89139
 Nevada contractor's license number **38155** issued by the State Contractor's Board
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1798**
 Signed **Phyllis J. Harding**
 By driller performing actual drilling on site or contractor
 Date **6-20-00**