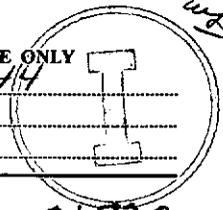


OFFICE USE ONLY
 Log No. 81544
 Permit No. _____
 Basin 212



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. 21830

1. OWNER William KePhart ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 2877 Thurman Ave Las Vegas Nev 89123 _____
 2. LOCATION NE 1/4 NW 1/4 Sec 12 T 22 N/S R 61 E Clark County _____
 PERMIT NO. 177-12-104-016 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 |
|----------------|--------------|------|-----|------------|
| Brown clay | | 0 | 20 | |
| Cracks | | 20 | 30 | |
| Brown clay | 3 | 30 | 165 | |
| cobbles | | | 165 | |
| cleaner sand | | 165 | 240 | |
| small boulders | 100+ | | 240 | |

8. WELL CONSTRUCTION
 Depth Drilled 240 Feet Depth Cased 235 Feet

HOLE DIAMETER (BIT SIZE)
 From To
12" Inches 0 Feet 240 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|------------|
| <u>6 5/8</u> | | <u>F480</u> | <u>+2</u> | <u>233</u> |
| <u>4 5/8</u> | | <u>188</u> | <u>+2</u> | <u>5'</u> |

Perforations:
 Type perforation Saw
 Size perforation 1/2" x 8 x 3
 From 175 feet to 235 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 100 _____
 Neat Cement
 Cement Grout
 Placement Method: Pumped Concrete Grout
 Poured

Gravel Packed: Yes No
 From 100 feet to 235 feet

9. WATER LEVEL
 Static water level 35 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 60.1 °F Quality Good

Date started 10-27-00, 19____
 Date completed 11-1-00, 19____

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

| G.P.M. | Draw Down (Feet Below Static) | Time (Hours) |
|-------------|-------------------------------|--------------|
| <u>100+</u> | | <u>30</u> |

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 8170 Haven Contractor
Las Vegas Nev 89123
 Nevada contractor's license number issued by the State Contractor's Board 38155
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1798
 Signed William M. Z. Redding
 By driller performing actual drilling on site or contractor
 Date 11-13-00

