

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

OFFICE USE ONLY
Log No. 52890
Permit No. 212
Basin 7

NOTICE OF INTENT NO. 21948

1. OWNER Amir Development

ADDRESS AT WELL LOCATION 1501 N. Decker Las Vegas, Nevada

2. LOCATION NE 1/4, NE 1/4, Sec 25, T. 20, N. 60 E Clark County
PERMIT NO. 138-25-503-000 Parcel No. 138-25-503-000 Subdivision Name

3. WORK PERFORMED
 New Well
 Replace
 Abandon
 Deepen
 Recondition
 Other
 Domestic
 Municipal/Industrial
 Irrigation
 Test
 Stock
 Cable
 Rotary
 RVC
 Air
 Other Auger

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>Silty Sand w/ Clay</u>		<u>0</u>	<u>2</u>	<u>2</u>
<u>Clay</u>		<u>2</u>	<u>7</u>	<u>5</u>
<u>Silty Sand w/ Clay</u>		<u>7</u>	<u>9</u>	<u>2</u>
<u>Clay</u>		<u>9</u>	<u>13</u>	<u>4</u>
<u>Silty Sand w/ Clay</u>		<u>13</u>	<u>25</u>	<u>12</u>

8. WELL CONSTRUCTION

Depth Drilled 25 Feet Depth Casd 25 Feet

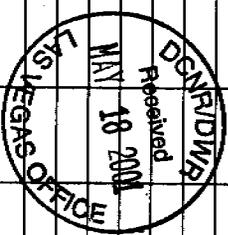
HOLE DIAMETER (BIT SIZE)

From 0 Feet To 25 Feet
 Inches 0 Feet
 Inches 0 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4 1/4</u>		<u>1/8</u>	<u>0</u>	<u>10</u>

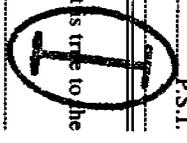
Performations: Factory Slotted
 Type perforation 0.030
 Size perforation 10 feet to 25 feet
 From 10 feet to 25 feet



Surface Seal: Yes No Seal Type: Neat Cement Cement Grout Concrete Grout
 Depth of Seal 8
 Placement Method: Pumped Poured
 Gravel Packed: Yes No 25 feet to 25 feet

9. 15 WATER LEVEL
 Static water level 15 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 MCCS



Contractor MCCS
 Address Village Center Circle St. 3-382 Las Vegas, Nevada 89134

Nevada contractor's license number 478571
 issued by the State Contractor's Board.
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2057

Signed [Signature]
 by driller (performing actual drilling on site or contractor)
 Date 5-16-09

Date started 10-21-2009
 Date completed 10-21-2009

7. WELL TEST DATA
 TEST METHOD: Bailor Pump Air Lift
 G.P.M. (Feet Below Static) _____ Time (Hours) _____