

Log No. 25423
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. 21249

1. OWNER MAYSON MADONTE LEGAL SERVICES ADDRESS AT WELL LOCATION 315 S. DEARAW BLVD.
MAILING ADDRESS 100 GLENDON AVE STE 1200 LAS VEGAS, NV 89107
LOS ANGELES CA 90024 CLARK County

2. LOCATION SE 1/4 ME 1/4 Sec 36 T. 20 N. 0 R. 60 E. CLARK Parcel No. 132-36-001-003 Subdivision Name _____

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other _____

4. Domestic Municipal/Industrial Irrigation Test Cable Rotary RVC
 Deepen Abandon Other _____ Monitor Stock Air Other _____

5. WELL TYPE 50-3

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>ASPHALT</u>		<u>0</u>	<u>1</u>	<u>1</u>
<u>GRAVELLY CLAY</u>		<u>1</u>	<u>4</u>	<u>3</u>
<u>SILTY CLAY</u>		<u>4</u>	<u>9</u>	<u>5</u>
<u>CLAYE</u>		<u>9</u>	<u>12</u>	<u>3</u>
<u>SANDY CLAY</u>		<u>12</u>	<u>17</u>	<u>5</u>
<u>CLAYE</u>		<u>17</u>	<u>18</u>	<u>1</u>
<u>SAND CLAY</u>		<u>18</u>	<u>20</u>	<u>2</u>
<u>W/TH SAND</u>		<u>20</u>	<u>21</u>	<u>1</u>
<u>CLAYE</u>		<u>21</u>	<u>35</u>	<u>14</u>
<u>SANDY CLAY</u>		<u>21</u>	<u>35</u>	<u>14</u>

8. WELL CONSTRUCTION
 Depth Drilled 35 Feet Depth Cased 35 Feet
 HOLE DIAMETER (BIT SIZE)
5 1/2 Inches From 0 Feet To 35 Feet
 _____ Inches From _____ Feet
 _____ Inches From _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2.375</u>		<u>0.308</u>		

Perforations:
 Type perforation Freeing Start PVC
 Size perforation 0.020
 From _____ feet to _____ feet 35 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type: Neat Cement
 Depth of Seal 5 Cement Grout
 Placement Method: Pumped Concrete Grout
 Poured
 Gravel Packed: Yes No
 From _____ feet to _____ feet 35 feet

9. WATER LEVEL
 Static water level 12 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 CONVENSIS CONSULTANTS
 Address 731 PLOT 8440 H
LAS VEGAS, NV 89115
 Contractor CONVENSIS CONSULTANTS



7. TEST METHOD: Bailor Pump Air Lift
 G.P.M. _____ Draw Down (Feet Below Static) _____ Time (Hours) _____
 Date started 9-10-01 ? 19____
 Date completed 9-10-01 ? 19____
 WELL TEST DATA