

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 **MADISON MALOUSTIC ASHLEY SERVICES**  
MAILING ADDRESS: **1100 GUENDBOU AVE STE 1200**  
**LOS ANGELES, CA 90024**

ADDRESS AT WELL LOCATION: **316 S. DECATUR BLVD.**  
**LAS VEGAS, NV 89107**

2. LOCATION **SE 1/4 NE 1/4 Sec. 36 T. 20 N. 8R. 60D E. CLARK** County **SW-10**

PERMIT NO. **138-36-601-003**

Parcel No.

Subdivision Name

3. WORK PERFORMED  
 New Well  
 Replace  
 Abandon  
 Recondition  
 Other.....  
 PROPOSED USE  
 Irrigation  
 Test  
 Monitor  
 Stock  
 Air  
 Other.....  
 WELL TYPE  
 Cable  
 Rotary  
 RVC  
 Other.....

LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
AGGREGATE		0	0.5	0.5
SANDY CLAY		0.5	6.5	6
CLAY		6.5	7.0	0.5
CLAY		7.0	9	2
SANDY CLAY		9	23.5	14.5
WITH GRAVEL				
CLAY		23.5	26	2.5
SANDY CLAY		26	29	3
WITH GRAVEL				
CLAY		29	34	5
SANDY CLAY		34	37	3

8. WELL CONSTRUCTION  
 Depth Drilled **37** Feet  
 HOLE DIAMETER (BIT SIZE)  
**5 1/2** Inches From **0** Feet To **37** Feet  
 Inches From \_\_\_\_\_ Feet To \_\_\_\_\_ Feet  
 Inches From \_\_\_\_\_ Feet To \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2.375		0.308	0	37

Perforations:  
 Type perforation **PERFORATING SLUG PVC**  
 Size perforation **0.020 in.**  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  Neat Cement  
 Pumped  Cement Grout  
 Placement Method:  Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

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 **CONVERSE CONSTRUCTION**  
 Contractor **H**

Address: **731 ALCOY ROAD**  
**LAS VEGAS, NV 89119**  
 Nevada contractor's license number **48547**  
 issued by the State Contractor's Board.  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **M-1589**

Signed **Converse Construction**  
 By driller performing actual drilling on site or contractor  
 Date \_\_\_\_\_

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

Date started **9/18/01** 19\_\_  
 Date completed **9/18/01** 19\_\_