

PRINT OR TYPE ONLY
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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. 22770

1. OWNER Danny White ADDRESS AT WELL LOCATION
 MAILING ADDRESS Same 4825 N. Dapple Gray
LV Nev. 89149
 2. LOCATION SW 1/4 SW 1/4 Sec 32 T 19S N/S R 60 E Clark County
 PERMIT NO. 38335 125-32-405-004 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
Gravel		390	430	
Gravel & Water	xx	430	450	
Cemented Gravel		450	540	
Gravel & Water	xx	540	560	
Clay & Gravel		560	620	
Gravel & Water	xx	620	670	
Original log # 21013				

8. WELL CONSTRUCTION
 Depth Drilled 670 Feet Depth Cased 670 Feet
 HOLE DIAMETER (BIT SIZE)
 From 7 7/8 Inches To 670 Feet
 From 390 Feet To 670 Feet
 From Inches To Feet
 From Inches To Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
5 1/2	SRD21	PVC	+1	670

Perforations:
 Type perforation Saw
 Size perforation .040 4 row
 From 620 feet to 660 feet
 From feet to feet
 From feet to feet
 From feet to feet
 From feet to feet

Surface Seal: Yes No Seal Type:
 Depth of Seal N/A Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From feet to feet

9. WATER LEVEL
 Static water level 375 feet below land surface
 Artesian flow G.P.M. P.S.I.
 Water temperature cool °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 Vernon H. Dimick Contractor
 Address 5360 Bonita Vista Contractor
Las Vegas, Nev. 89149
 Nevada contractor's license number 10062
 issued by the State Contractor's Board.
 Nevada driller's license number issued by the 552
 Division of Water Resources the on-site driller.
 Signed VH Dimick
 By driller performing actual drilling on site or contractor
 Date 04-22-02

Date started 4/18/02, 19.....
 Date completed 4/20/02, 19.....

7. WELL TEST DATA

TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	