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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 22645

1. OWNER Kiowit Western ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 1111 Mary Crest Rd. Suite F Henderson, NV 89074 Northshore Rd. Las Vegas Wash
 2. LOCATION NE 1/4 SE 1/4 Sec. 14 T. 21 N/S R. 63 E Clark County
 PERMIT NO. DW-1146 160-14-001-001 Las Vegas Wash Bridge Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other _____
 4. PROPOSED USE Temp Dewcty
 Domestic Irrigation Test Cable Rotary RVC
 Municipal/Industrial Monitor Stock Air Other Drill test

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Well #1 Fill		0'	4'	4'
Sands + Gravel		4'	15'	9'
Silty Clay		17'	20'	5'
Silty Sands + Gravel		20'	26'	6'
Silty Clay		26'	30'	4'
Well #2 Same as #1				
Well #3 Fill		0'	4'	4'
Sands + Gravel		4'	10'	6'
Silty Sands + Clay		10'	16'	6'
Silty Sands + Gravel		16'	25'	9'
Silty Clay		25'	30'	5'

8. WELL CONSTRUCTION
 Depth Drilled 30' Feet Depth Cased 30' Feet
 HOLE DIAMETER (BIT SIZE)
 From 24" To 30"
 Inches Feet Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>12"</u>	<u>PVC</u>	<u>Sec-40</u>	<u>0</u>	<u>10'</u>

Perforations:
 Type perforation Saw Cut
 Size perforation 1.032
 From 10' feet to 30' feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 0 feet to 30' feet

9. WATER LEVEL
 Static water level 4' feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature Coal °F Quality Good

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Griffith's Drilling
 Address 536 E. Mainland St Ontario, CA 91761
 Nevada contractor's license number issued by the State Contractor's Board 0031246
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-1985
 Signed _____
 By driller performing actual drilling on site or contractor
 Date 4-3-02

Date started 4-3-02, 19_____
 Date completed 4-3-02, 19_____

7. WELL TEST DATA

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