

OFFICE USE ONLY
 Log No. 89278
 Permit No. _____
 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. 24908

1. OWNER Maryland Square Shopping Center ADDRESS AT WELL LOCATION 3528 S. Maryland
 MAILING ADDRESS 777 N. Rainbow Blvd Las Vegas, NV
Las Vegas, NV. 89107

2. LOCATION SW 1/4 NW 1/4 Sec. 14 T. 21 N/S R. 61 E Clark County
 PERMIT NO. 162-14-213-002 Issued by Water Resources Parcel No. _____ 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 Auger

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Asphalt		0	6"	.05
Base		6"	2'	1.5
Silty / clay		2'	3'	1.0
Caliche		3	4	1.0
silty / clay w/sand	18'	4	20	16.0
clay w/sand		20	29	9.0

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8. WELL CONSTRUCTION
 Depth Drilled 29 Feet Depth Cased 29 Feet

HOLE DIAMETER (BIT SIZE)
 From 8" To 29'
 Inches _____ Feet _____
 Inches _____ Feet _____
 Inches _____ Feet _____

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2"	PVC	sch 40	0	29

Perforations:
 Type perforation Factory slot.
 Size perforation .020
 From 9 feet to 29 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 7ft to surface Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 18 FT. 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 Elite Drilling Inc.
 Address 5115 S. Industrial rd. #104
Las Vegas, NV 89118
 Nevada contractor's license number 0054931
 issued by the State Contractor's Board.
 Nevada driller's license number issued by the M-1869
 Division of Water Resources the on-site driller
 Signed _____
 By driller performing actual drilling on site or contractor
 Date 5/7/03

Date started 5/6 2003
 Date completed 5/6 2003

7. WELL TEST DATA

TEST METHOD:	Bailer	Pump	Air Lift
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	