

WHITE-DIVISION OF WATER RESOURCES
 CANARY-CLIENT'S COPY
 PINK-WELL DRILLER'S COPY

STATE OF NEVADA
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY
 Log No. 90052
 Permit No. _____
 Basin 210

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. 24287

1. OWNER Southern Nev. Water Authority ADDRESS AT WELL LOCATION 13.6 miles North
 MAILING ADDRESS 1001 S. Valley View Blvd. of US 93 and State Rt. 168 Junction
Las Vegas, NV 89153

2. LOCATION SE 1/4 NE 1/4 Sec. 25 T. 10 N. R. 262 E Lincoln County
 PERMIT NO. R-1093 00833101
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 _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Gravel, Volcanic & Carbonate		0	80	80
Coarse gravel & limestone		80	110	30
Gray limestone/dolomite		110	170	60
Gray limestone, yellow clay		170	250	80
Medium to dark gray limestone		250	350	100
fine grain limestone		350	450	100
gray limestone fine grain				
with minor calcite veining	485'	450	680	230
dark gray to black, fine				
grain limestone with minor				
to trace calcite veining		680	980	300
medium gray limestone		980	1010	30
dark gray to black limestone dolomite				
with minor calcite veining		1010	1230	120
First water contact was at	485'***			

8. WELL CONSTRUCTION
 Depth Drilled 1230 Feet Depth Cased 1200 Feet
 HOLE DIAMETER (BIT SIZE)

Inches	From	To
15	0	220
10	220	960
9 1/8	960	1220

 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8			+2	1200
10			0	220
16			0	20

 Perforations:
 Type perforation slotted
 Size perforation _____
 From 1180 feet to 380 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 220 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From _____ feet to _____ feet

Date started 5-4 2003
 Date completed 5-20, 192003

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 checked="" type="checkbox"/> Air Lift	75		2 hrs.

9. WATER LEVEL
 Static water level 445.2 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 23.3 °F Quality clean

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Eklund Drilling Co., Inc.
 Address P. O. Box 2748
Elko, NV 89803
 Nevada contractor's license number issued by the State Contractor's Board 0030823
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-1819
 Signed Greg Seerist
 By driller performing actual drilling on site or contractor
 Date 6/6/03