

OFFICE USE ONLY
 Log No. 9182
 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. 22650

1. OWNER Centri. Court. ADDRESS AT WELL LOCATION Vegas Valley + Hollywood
 MAILING ADDRESS 1720 E Lake Meade Dr. Henderson, NV
 2. LOCATION 1/4 W 1/4 SW 1/4 Sec. 14 T. 21 N. R. 63 E Clark County
 PERMIT NO. DW-1170 Parcel No. 161-14-399-001 Subdivision Name _____

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other _____
 4. PROPOSED USE Trng Dewatering
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock
 5. WELL TYPE
 Cable Rotary RVC
 Air Other Bucket Aug

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Silty Clay (Dry)</u>		<u>0</u>	<u>15</u>	
<u>Silty Sands</u>		<u>15</u>	<u>25</u>	
<u>Clay</u>		<u>22</u>	<u>35</u>	
<u>Silty Clay (Dry)</u>		<u>0</u>	<u>15</u>	
<u>Silty Sands</u>		<u>15</u>	<u>25</u>	
<u>Clay</u>		<u>22</u>	<u>35</u>	
<u>Silty Clay (Dry)</u>		<u>0</u>	<u>17</u>	
<u>Silty Sands</u>		<u>17</u>	<u>20</u>	
<u>Clay</u>		<u>20</u>	<u>35</u>	
<u>Same as #3</u>				

8. WELL CONSTRUCTION
 Depth Drilled 32 Feet Depth Cased 30 Feet
 HOLE DIAMETER (BIT SIZE)
 From 24 Inches To 35 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6</u>	<u>DWC</u>	<u>Sec-40</u>	<u>0</u>	<u>15</u>

Perforations:
 Type perforation Saw Cut
 Size perforation 6 3/4
 From 15 feet to 25 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Depth of Seal _____ Cement Grout
 Placement Method: Pumped Concrete Grout
 Poured
 Gravel Packed: Yes No
 From 0 feet to 30 feet

9. WATER LEVEL
 Static water level 13 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 60.1 °F Quality Good

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the reports true to the best of my knowledge.
 Name Griffin Dewatering Contractor
 Address 536 E. Main St. Ontario CA 91761 Contractor
 Nevada contractor's license number issued by the State Contractor's Board 0031940
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-1985
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 9-17-03

Date started 9-17-03, 20.....
 Date completed 9-17-03, 20.....

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			

DO NOT DRILL
 RECEIVED
 BILL 20 2003
 LAS VEGAS OFFICE

