

OFFICE USE ONLY
 Log No. 91350
 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 Cont. Const. Henderson ADDRESS AT WELL LOCATION Vegas Valley + Hollywood
 MAILING ADDRESS 1720 E. Lake Mead Dr.

2. LOCATION NW 1/4 SW 1/4 Sec 14 T 21 N 62 E County _____
 PERMIT NO. DW 1170 Issued by Water Resources Parcel No. 161-14-399-001 Subdivision Name _____

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other _____

4. PROPOSED USE Temp Dewatering
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock

5. WELL TYPE
 Cable Rotary RVC
 Air Other Bucket Rigs

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>Dry Clays + Silty</u>		<u>0</u>	<u>14</u>	
<u>Silty Sands</u>		<u>14</u>	<u>18</u>	
<u>Silty Clays</u>		<u>18</u>	<u>26</u>	
<u>Clay</u>		<u>26</u>	<u>35</u>	
Well #2 <u>Same as #1</u>				
Well #3 <u>Dry Clays + Silts</u>				
<u>Silty Sands</u>		<u>0</u>	<u>14</u>	
<u>Silty Clays</u>		<u>14</u>	<u>18</u>	
<u>Silty Sands + Gravel</u>		<u>18</u>	<u>24</u>	
<u>Clay</u>		<u>24</u>	<u>26</u>	
		<u>26</u>	<u>35</u>	

8. WELL CONSTRUCTION
 Depth Drilled 35 Feet Depth Cased 35 Feet

HOLE DIAMETER (BIT SIZE)
24 Inches From 0 Feet 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>PVC</u>	<u>Sch-40</u>	<u>0</u>	<u>15</u>

Perforations:
 Type perforation Saw Cut
 Size perforation 1.032
 From 15 feet to 35 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Depth of Seal _____
 Placement Method: Pumped Poured

Gravel Packed: Yes No
 From 0 feet to 35 feet

Date started 11-12-03, 20 _____
 Date completed 11-12-03, 20 _____

7. WELL TEST DATA

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

9. WATER LEVEL
 Static water level 14 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 Frith Dewatering Contractor
 Address 536 E. Main St. Ontario CA 91761 Contractor
 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 11-12-03