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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. 21131

1. OWNER CLARK CO. ADDRESS AT WELL LOCATION _____
MAILING ADDRESS 500 S. GRAND CENTRAL PKY
LAS VEGAS, NEVADA 89155
2. LOCATION SE 1/4 SE 1/4 Sec. 27 T. 21 N. R. 62 E. CLARK County
PERMIT NO. DW 155 Issued by Water Resources Parcel No. 161-27-896-002 Subdivision Name NA

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other _____
4. PROPOSED USE
 Domestic Municipal Industrial Irrigation Test Monitor Stock

5. WELL TYPE
 Cable Rotary RVC
 Air Other BUCKET

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
INTENT TO DRILL 30 WELLS				
ONLY 18 COMPLETED @ THIS TIME				
CLAY w/ GRAVEL LENSES		0	32	32

8. WELL CONSTRUCTION
Depth Drilled 32 Feet Depth Cased 32 Feet
HOLE DIAMETER (BIT SIZE)
From 20 Inches To 0 Feet 32 Feet
CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
12	14	.250	0	12

Perforations:
Type perforation LOUVERED
Size perforation 040
From 12 feet to 32 feet
Surface Seal: Yes No Seal Type:
Depth of Seal 10' Neat Cement
Placement Method: Pumped Poured Cement Grout Concrete Grout
Gravel Packed: Yes No
From 10 feet to 32 feet

9. WATER LEVEL
Static water level 6 feet below land surface
Artesian flow NO G.P.M. _____ F.S.I. _____
Water temperature _____ °F Quality _____

10. DRILLER'S CERTIFICATION
Date started FEBRUARY 10, 2003 19_____
Date completed JULY 10, 2003 19_____
This well was drilled under my supervision and the report is true to the best of my knowledge.

Name KELLEY DEWATERING CONSTRUCTION CO. Contractor
Address 5175 CLAY Contractor
WYOMING, MICH. 49548
Nevada contractor's license number issued by the State Contractor's Board ABDS 2149
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 50326
Signed [Signature]
By driller performing actual drilling on site or contractor
Date 10-3-03

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			