

STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 91404
 Permit No. _____
 Basin. 212

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

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 1155 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 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
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

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

Perforations:
 Type perforation LOUVERED
 Size perforation 0.40
 From 12 feet to 32 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 10' Neat Cement
 Placement Method: Pumped Cement Grout
 Poured 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
 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

Date started FEBRUARY 10, 2003 19
 Date completed JULY 10, 2003 19

7. WELL TEST DATA

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