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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. 25117

1. OWNER J.V. Properties LLC ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 3455 Cliff Shadows Pky. Suite 220
Las Vegas, Nev. 89129
 2. LOCATION SE 1/4 SE 1/4 Sec. 34 T. 22S N/S R. 60 E Clark County _____
 PERMIT NO. 176-34-801-002 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
NAC. 534-420 Section 8				
A. Depth of Well - 660 Ft.				
B. The depth to which the materials used to plug the well were placed: 660 Ft.				
C. The type, size and location of the perforations which were made in the casing: NONE				
D. The debris encountered in, milled out of or retrieved from the well: 5in. Plastic Pipe				
E. Materials used to Plug the well: 27 Sack Neat cement Section 9 Neat cement by tremie pipe in an upward direction. <u>5.0 yds</u>				
DNH/DWH RECEIVED NOV 13 2003 LAS VEGAS OFFICE				

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

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

 Perforations:
 Type perforation _____
 Size perforation _____
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From _____ feet to _____ feet

Date started 9/15/03, 19_____
 Date completed 9/20/03, 19_____

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

9. WATER LEVEL
 Static water level 490 feet below land surface
 Artesian flow _____ G.P.M. _____ P.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 Vernon H. Dimick Contractor
 Address 5360 N. Bonita Vista St.
Las Vegas, Nev. 89149
 Nevada contractor's license number 10062 issued by the State Contractor's Board
 Nevada driller's license number issued by the 552 Division of Water Resources, the on-site driller.
 Signed V.H. Dimick
 By driller performing actual drilling on site or contractor
 Date 11-03-03