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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
 Toos

NOTICE OF INTENT NO. 25548

1. OWNER Distinctive Homes Toas Estates 111 ADDRESS AT WELL LOCATION 6245 W Reno Vista
 MAILING ADDRESS _____

2. LOCATION NW 1/4 NE 1/4 Sec. 27 T 19S N/S R 60 E Clark County
 PERMIT NO. 125-27-503-014 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 Sect. 8				
A. Depth of Well - 390 Ft.				
B. The depth to which the materials used to plug the well were placed 390 ft.				
C. The type, size & location of the perforations which were made in the casing: Type: Knife (Rotary) Size: 1/4" x 1 1/2" Location: 390 up to 50 ft.				
D. The debris encountered: None				
E. Materials used to plug the wells 25 sack cement slurry materials slips attached.				
Section 9: Neat cement by Tremie pipe in an upward direction.				

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
 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 _____ feet to _____ feet

Date started 12/24/03, 19_____
 Date completed 12/27/03, 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 122 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. Contractor
Las Vegas Nev. 89149
 Nevada contractor's license number issued by the State Contractor's Board 10062
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 552
 Signed V.A. Dimick
 By driller performing actual drilling on site or contractor
 Date 12-29-03