

COPIES TO
 - DIVISION OF WATER RESOURCES
 - CLIENT'S COPY
 - WELL DRILLER'S COPY

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

OFFICE USE ONLY
 Log No. 92382
 Permit No. _____
 Basin 212
 NOTICE OF INTENT NO. 25833

PRINT OR TYPE ONLY

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

1. OWNER EASTERN 17 LLC INSIGHT REALTY ADDRESS AT WELL LOCATION 5711 S EASTERN AVE
 MAILING ADDRESS 3068 E SUNSET RD #17 LAS VEGAS, NV
LAS VEGAS, NV 89120 6751

2. LOCATION SE 1/4 NE 1/4 Sec 02 T 22 S R 61 E CLARK County
 PERMIT NO. 177-02-602-007

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
Plug 1-139' domestic well				
Casing 8 5/8"				
Depth 139'				
W/L 23'				
Trimmie 2.5 yards of W171 mix through 2" plastic tube.				
2" tube cemented in place				
Logging of well log # 51692				
DCNR/DWR RECEIVED				
FEB 17 2004				
LAS VEGAS OFFICE				

8. WELL CONSTRUCTION

Depth Drilled _____ Feet Depth Cased _____ Feet

HOLE DIAMETER (BIT SIZE)

Inches	Feet	Inches	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: _____
 Depth of Seal _____ Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level _____ 23' feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 1/30, 20 04
 Date completed 1/30, 20 04

7. WELL TEST DATE

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

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name ALLEN DRILLING INC.
 (CONTRACTOR)
 Address 4015 WEST TOMPKINS AVE.
 (CONTRACTOR)
LAS VEGAS, NV 89103
 Nevada contractor's license number issued by the State Contractor's Board 0018916 & 0018917
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1301
 Signed Allen Drilling Inc.
 By driller performing actual drilling on site or contractor
 Date 2/9/04