

OFFICE USE ONLY
 Log No. 93031
 Permit No. _____
 Basin 212

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

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. 24469

1. OWNER City of Henderson ADDRESS AT WELL LOCATION Henderson Landfill
 MAILING ADDRESS 240 Water St. 4th Floor 1/2 mile N. of Olson Streets &
Henderson, NV 89009 Lake Mead Dr.
 2. LOCATION 1/4 SE 1/4 Sec. 29 T. 21 N. S. R. 63 E County _____
 PERMIT NO. 160-29-801-003 Parcel No. _____ Subdivision Name Henderson Landfill
 Issued by Water Resources _____

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
FILL SAND & GRAVEL		0	1	1
SILTSTONE		1	20	19
ROCK BASALT		20	40	20
SANDY GRAVEL		40	57	17
SANDY CLAY W/ GRAVEL		57	59	2
GRAVEL / FRACTURED ROCK		59	100	41
GRAVEL W/ SAND & CLAY	Y	100	105	5
SANDY GRAVEL W/ CLAY	Y	105	110	5
SHALE-CLAYEY	N	110	115	5
SANDY CLAY W/ GRAVEL	N	115	120	5

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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 4-6, 2004
 Date completed 4-6, 2004

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			

9. WATER LEVEL
 Static water level 94 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 WDC Exploration & Wells
 Address 1421 S. 39th Ave
Phoenix, AZ 85009
 Nevada contractor's license number 0012852
 issued by the State Contractor's Board.
 Nevada driller's license number issued by the M-1747
 Division of Water Resources, the on-site driller.
 Signed _____
 By driller performing actual drilling on site or contractor
 Date 4/13/04