

OFFICE USE ONLY  
 Log No. 93848  
 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. 26723

1. OWNER Mountains Edge LLC ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS 3455 Cliff Shadows Cactus & Tenaya  
 PW 220 LV Nev. 89129  
 2. LOCATION SW 1/4 SE 1/4 Sec 27 T. 22S N/S R. 60 E. Clark County \_\_\_\_\_  
 PERMIT NO. 176-27-801-008 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 <u>625 Ft.</u>				
B. The depth to which the material used to plug the well were placed - <u>625 ft.</u>				
C. The type -size & location of perforations which were made in the casing Type - <u>Knife (Rotary)</u> Size - <u>1/4" x 1 1/2"</u> Location: <u>625 ft. up to 280 ft. 4 Times Around</u>				
D. Debris encountered: <u>NONE</u>				
E. Materials used to plug the well <u>24 Sack slurry</u> <u>Materials slip attached</u>				
Section 9 <u>Neat Cement pumped in</u>				

*Plugging of 105# 68443*

8. WELL CONSTRUCTION

Depth Drilled \_\_\_\_\_ Feet Depth Cased \_\_\_\_\_ Feet

HOLE DIAMETER (BIT SIZE)

From		To	
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  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 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 8/5/04, 20 \_\_\_\_\_  
 Date completed 8/13/04, 20 \_\_\_\_\_

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 320 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, Nevada 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 08-13-04