

OFFICE USE ONLY
 Log No. 94856
 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. 27459

1. OWNER Alfredo O. & Visitacion Delapena ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 8460 Ranch destino Las Vegas NV 8460 Ranch destino
 2. LOCATION SE 1/4 NW 1/4 Sec 16 T 22 N 01 E CLARK County
 PERMIT NO. _____ Parcel No. 177-16-204-012 Subdivision Name _____

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other plug

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
<u>Sanded bottom @ 275 1/2</u>				
<u>bailed & lost Footage</u>				
<u>Mills KNIFE Hung up at 106. Stuck @ 270</u>				
<u>perforated from 220ft. to 88ft. orig log # 59105</u>				
<u>Transis Live to 270' pumped, 8 yrs Next Cement.</u>				
<u>cut cased at cement Slab.</u>				

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	To
_____ feet to _____ feet	_____ feet to _____ feet
_____ feet to _____ feet	_____ feet to _____ feet
_____ feet to _____ feet	_____ feet to _____ feet
_____ feet to _____ feet	_____ 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 Dec 13, 2004
 Date completed Dec 23, 2004

7. WELL TEST DATA

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

9. WATER LEVEL

Static water level 138 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 W.D.C. Exploration & wells Contractor
 Address 570 Corinthian Way North Las Vegas, NV 89030 Contractor
 Nevada contractor's license number issued by the State Contractor's Board 0012952
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2248 LBD
 Signed [Signature] Driller performing actual drilling on site or contractor
 Date Jan. 14 2005

LXCNH/DWH
RECEIVED
 JAN 14 2005
LAS VEGAS OFFICE