

Log No. **94901**
Permit No. **212**
Basin **212**

WELL DRILLER'S REPORT

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

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

NOTICE OF INTENT NO. **26600**

1. OWNER **ROBERT LEMK**
MAILING ADDRESS **322 LAKE SHORE RD.**
BOLSON CITY NV.

ADDRESS AT WELL LOCATION **LOS NORTH SHORE RD - 088**
EVANS BAY RESORT
OVERBAY NV. **89640** **CLARK** County

2. LOCATION 1/4 Sec **5E** 1/4 Sec **6E** T **19**
Permit No. **740-360-019** Parcel No. **116-00-001-003**

N/S R **586B**
Subdivision Name **116-00-001-003**

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other
4. Domestic Municipal/Industrial
 Irrigation Test Monitor Stock
5. WELL TYPE
 Cable Rotary RVC
 Air Other **HSA**

6. LITHOLOGIC LOG

Material	Water Static	From	To	Thickness
Sand & Gravel		0.0	52.0	52.0

8. WELL CONSTRUCTION
Depth Drilled **52** Feet Depth Cased **50** Feet
HOLE DIAMETER (BIT SIZE)
1 1/2 Inches **0.0** Feet **25.0** Feet
1 1/2 Inches **6.0** Feet **52.0** Feet
Inches Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4.25		5/16	0.0	25.0
4.25		5/16	25.0	52.0

Perforations:
Type perforation **MACHINE SEAL**
Size perforation **1.000**
From **25.0** feet to **52.0** feet
From **52.0** feet to **16.0** 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
Depth of Seal: _____
Placement Method: Pumped Poured
Gravel Packed: Yes No **25.0 to 50**
From **52.0** feet to **8.0** feet

9. WATER LEVEL
Static water level _____ 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 **EPHE Delima Services LLC** Contractor
Address **7150 RAVIN** Contractor
LAS VEGAS NV. 89119

Nevada contractor's license number **57266**
issued by the State Contractor's Board
Nevada driller's license number issued by the **PM 2272**
Division of Water Resources, the on-site driller

Signed **Thom B. [Signature]**
By driller performing actual drilling on site or contractor
Date **11/02/04**

Date started **11/01**, 20**04**
Date completed **11/02**, 20**04**

7. WELL TEST DATA
TEST METHOD: Bailor Pump Air Lift
G.P.M. Draw Down (Feet Below Static) Time (Hours)

DGNR/DWFR RECEIVED
JAN 04 2005
LAS VEGAS OFFICE