

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. 26908

1. OWNER Nevada Power ADDRESS AT WELL LOCATION Reidgardner
 MAILING ADDRESS 12210 W Sahara Ave 501 Wally Kay Way
Las Vegas, NV 89140 Moapa, NV 89025
 2. LOCATION SW 1/4 NW 1/4 Sec. 9 T. 15 N. 06 E. Clark County
 PERMIT NO. 04209201002 Issued by Water Resources Parcel No. _____ Subdivision Name _____

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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Silt sand & gravel</u>		<u>0</u>	<u>10</u>	
<u>Silty clay w/sand</u>		<u>10</u>	<u>25</u>	
<u>clay</u>	<u>25</u>	<u>25</u>	<u>35</u>	

8. WELL CONSTRUCTION
 Depth Drilled 35 Feet Depth Cased 35 Feet
 HOLE DIAMETER (BIT SIZE)
 From 4 Inches To 3.5 Feet
 _____ Inches _____ Feet
 _____ Inches _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4</u>	<u>PVC</u>	<u>Sch 40</u>	<u>0</u>	<u>35</u>

Perforations:
 Type perforation Factory slot
 Size perforation .020
 From 10 feet to 35 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type: Neat Cement
 Depth of Seal 8 to surface Cement Grout
 Placement Method: Pumped Concrete Grout
 Poured
 Gravel Packed: Yes No
 From 8 feet to 35 feet

9. WATER LEVEL
 Static water level 25 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 Elite Drilling Contractor
 Address 4255 W. Post Rd. Contractor
Las Vegas, NV 89118
 Nevada contractor's license number 0054931
 issued by the State Contractor's Board
 Nevada driller's license number issued by the M-18269
 Division of Water Resources, the on-site driller
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 4/11/05

Date started Feb 9th, 2005
 Date completed Feb 9th, 2005

7. WELL TEST DATA

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