

OFFICE USE ONLY
 Log No. **96744**
 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. **26909**

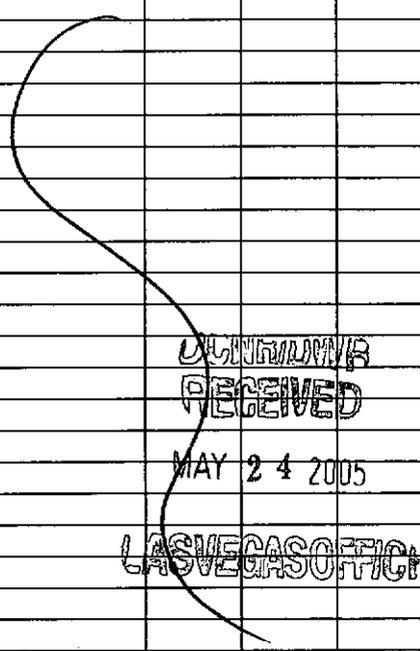
1. OWNER Nevada Power Company ADDRESS AT WELL LOCATION Sunrise Power Plant
 MAILING ADDRESS 6226 W. Sahara Ave. 6300 Vegas Valley Dr.
Las Vegas, NV 89146 Las Vegas, NV
 2. LOCATION SW 1/4 NE 1/4 Sec 10 T. 215 N/S R. 82 E Clark County
 PERMIT NO. _____ Parcel No. 161-10-601-001 Subdivision Name _____
 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 |
|--|--------------|------|----|------------|
| well was drilled to 30' | | | | |
| out and grouted | | | | |
| with bentonite grout | | | | |
|  | | | | |

8. WELL CONSTRUCTION
 Depth Drilled 30 Feet Depth Cased _____ Feet
 HOLE DIAMETER (BIT SIZE)
 From 6 Inches To 30' 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
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal _____
 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From _____ feet to _____ feet

Date started 4/25 2005
 Date completed 4/25 2005

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 _____ 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 Inc.
 Address 4255 W. Post rd.
Las Vegas, NV 89118
 Nevada contractor's license number 0054931
 issued by the State Contractor's Board
 Nevada driller's license number issued by me M-1869
 Division of Water Resources, the on-site driller
 Signed _____
 By driller performing actual drilling on site or contractor
 Date 5/21/05