083504

WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

14 WELLS

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

STATE OF NEVADA
DIVISION OF WATER RESOURCES

# WELL DRILLER'S REPORT

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

OFFICE USE ONLY
Log No. 98154
Permit No.
Basin 212

NOTICE OF INTENT NO. 25928

1. OWNER JOHN GLEKBERG
MAILING ADDRESS 621 SPEAR ST #250 SAN FRANCISCO CA.
ADDRESS AT WELL LOCATION 6040 SPRING MT. LAS VEGAS NV.

2. LOCATION SW ¼ NW ¼ Sec. 13 T. 21 N/S R. 60 E. CLARK County
PERMIT NO. (Issued by Water Resources) Parcel No. 163-13-101-005 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 | Thickness |
|---|---|---|---|---|
| REMOVED WELL BOXES | | | | |
| TRIED TO PULL CASING | | | | |
| TREMMIED NEAT CEMENT FROM BOTTOM TO TOP | | | | |
| CEMENT SEEN ON TOP | | | | |

DCNR/DWR
RECEIVED
DEC 30 2005
LAS VEGAS OFFICE

Date started 12/21, 2005
Date completed 12/22, 2005

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

| | G.P.M. | Draw Down (Feet Below Static) | Time (Hours) |
|---|---|---|---|
| | | | |

8. WELL CONSTRUCTION
Depth Drilled ____ Feet Depth Cased ____ Feet

HOLE DIAMETER (BIT SIZE)

| | From | To |
|---|---|---|
| Inches | Feet | 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
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: ☐ Yes ☐ No
Depth of Seal
Placement Method: ☐ Pumped ☐ Poured
Seal Type: ☐ Neat Cement ☐ Cement Grout ☐ Concrete Grout
Gravel Packed: ☐ Yes ☐ No
From ____ feet to ____ 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 EAGLE DRILLING SERVICES LLC (Contractor)
Address 7150 PEARL ST (Contractor)
LAS VEGAS NV. 89119
Nevada contractor's license number issued by the State Contractor's Board 51266
Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-2272
Signed (By driller performing actual drilling on site or contractor)
Date 12/22/05

(Rev. 12-01) USE ADDITIONAL SHEETS IF NECESSARY (O)-627