

OFFICE USE ONLY  
Log No. **98558**  
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. **28832**

1. OWNER **ENSR** ADDRESS AT WELL LOCATION \_\_\_\_\_  
MAILING ADDRESS **1220 AVENIDA ACASO** **900 N. RANCHO DE LAS VEGAS, NV**  
**CAMARILLO, CA 93012**

2. LOCATION **SE 1/4 NW 1/4 Sec 29 T. 20 N. R. 61 E** **CLARK** County  
PERMIT NO. \_\_\_\_\_ Parcel No. **139-29-201-005** 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	Thickness
<b>① Pull casing from wells.</b>				
<b>② ABANDON wells By pumping NEAT CEMENT FROM BOTTOM TO TOP.</b>				
<b>(15) 2" wells</b>				
<b>(2) 4" wells</b>				
<b>DOWN/DWR RECEIVED</b>				
<b>DEC 23 2005</b>				
<b>LAS VEGAS OFFICE</b>				

8. WELL CONSTRUCTION

Depth Drilled \_\_\_\_\_ Feet Depth Cased \_\_\_\_\_ Feet

HOLE DIAMETER (BIT SIZE)

Inches	Feet	Feet
From	To	
_____	_____	_____
_____	_____	_____
_____	_____	_____

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

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

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 **WDC EXPLORATION & WELLS** Contractor  
Address **570 CORINTHIAN WAY** Contractor  
**N. LAS VEGAS**

Nevada contractor's license number issued by the State Contractor's Board \_\_\_\_\_  
Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2057**

Signed **[Signature]**  
By driller performing actual drilling on site or contractor  
Date **12-22-05**

Date started **12-1**, 2005  
Date completed **12-3**, 2005

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

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