COPIES TO
- DIVISION OF WATER RESOURCES
- CLIENT'S COPY
- WELL DRILLER'S COPY

PRINT OR TYPE ONLY

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. 98614
Permit No.
Basin 212

NOTICE OF INTENT NO. 28406

1. OWNER LUCID LAND DEVELOPMENT LLC
MAILING ADDRESS 2865 S JONES BLVD.
LAS VEGAS, NV 89146

ADDRESS AT WELL LOCATION 6269 HOPE ST
NORTH LAS VEGAS, NV

2. LOCATION NW ¼ NW ¼ Sec 26 T 19 S R 61 E CLARK County

PERMIT NO. | Issued by Water Resources | 124-26-102-001 Parcel No. | 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
Plug 1 domestic well				
Depth 300'				
Casing 8 5/8"				
Static water level 82'				
Perforate from 50' to 300'				
Trimmie 6 yards of W171				
slurry to top of well.				

DCNR/DWR
RECEIVED
JAN 26 2006
LAS VEGAS OFFICE

Date started 1/12, 20 06
Date completed 1/12, 20 06

7. WELL TEST DATE

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 Seal Type:
Depth of Seal ☐ Neat Cement
Placement Method: ☐ Pumped ☐ Cement Grout
☐ Poured ☐ 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 ALLEN DRILLING INC. (CONTRACTOR)
Address 4015 WEST TOMPKINS AVE. (CONTRACTOR)
LAS VEGAS, NV 89103
Nevada contractor's license number issued by the State Contractor's Board 18916 & 18917
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1301
Signed [signature]
By driller performing actual drilling on site or contractor
Date 1/17/06

(Rev 12/01) USE ADDITIONAL SHEETS IF NECESSARY

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Adriana