

7wells

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

STATE OF NEVADA  
DIVISION OF WATER RESOURCES

OFFICE USE ONLY

Log No. 1007557

Permit No. \_\_\_\_\_

Basin 215

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. 30228

1. OWNER Callville Bay Marina ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS Box 100 HCR-30 Callville Bay Marina  
Las Vegas NV 89124 Callville Bay, NV

2. LOCATION NW 1/4 NW 1/4 Sec 9 T. 21 N. 65 E. County Clark

PERMIT NO. 157-09-001-003 Parcel No. \_\_\_\_\_ 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 Auger

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
1) Attempted to pull casing				
2) Abandoned 7 wells				
- 3 wells to 85 feet				
- 4 wells to 105 feet				
3) Pumped 3.2 yards				
from bottom to top.				
SEP 22 2006				

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.....feet  Neat Cement

Placement Method:  Pumped  Poured  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.....

Date started.....9/18/2006

Date completed.....9/19/2006

7. WELL TEST DATA

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

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name.....NDC Exploration & Wells Contractor

Address.....570 Corinthian Way Contractor  
N. Las Vegas, NV 89030

Nevada contractor's license number issued by the State Contractor's Board.....0012852

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.....9/21/06