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WELL DRILLER'S REPORT

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

USA Corp of Engineers

NOTICE OF INTENT NO. 57860

1. OWNER BERND SCHMIDT ADDRESS AT WELL LOCATION NW-139
 MAILING ADDRESS 4349 DUFFER DR. STE 1601 SITE 55-46
NELLIS A.F.B. NEV. 89191-7007
 2. LOCATION SE 1/4 SW 1/4 Sec 34 T. 19 N. R. 62 E. CLARK County
 PERMIT NO. 12334401003 Parcel No. NELLIS A.F.B. 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 Sonic

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>LT. BRN SILTY CLAY</u>				
<u>GRAVEL</u>		<u>0</u>	<u>3</u>	<u>3</u>
<u>BRN SILTY CLAY</u>				
<u>CALICHE</u>		<u>3</u>	<u>102</u>	<u>99</u>
<u>BRN SANDY CLAY</u>				
<u>CALICHE</u>	<u>NET</u>	<u>102</u>	<u>109.5</u>	<u>7.5</u>
<u>BRN CLAY - FINE SAND</u>		<u>109.5</u>	<u>113</u>	<u>3.5</u>

8. WELL CONSTRUCTION
 Depth Drilled 113 Feet Depth Cased 108 Feet
 HOLE DIAMETER (BIT SIZE)
 From 8 Inches To 11.3 Feet
 _____ 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)
<u>2 3/8</u>	<u>SCH 40</u>	<u>RVC</u>	<u>0</u>	<u>108</u>

Perforations:
 Type perforation SLOTTED
 Size perforation 1.010
 From 7.8 feet to 10.8 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 7.6 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 7.6 feet to 10.8 feet

9. WATER LEVEL
 Static water level 83.42 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 10/5/06, 20
 Date completed 10/5/06, 20

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 PROSONIC CORP. Contractor
 Address 12464 M'CAW DR. Contractor
SANTA FE SPRINGS CA. 90670
 Nevada contractor's license number issued by the State Contractor's Board 0051765
 Nevada driller's license number issued by the Division of Water Resources the on-site driller 2303
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 10/26/06