



PRINT OR TYPE ONLY
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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

NOTICE OF INTENT NO. 31071

1. OWNER Ford Duneville LLC ADDRESS AT WELL LOCATION 5965 W Ford
 MAILING ADDRESS LV, NV

2. LOCATION SW 1/4 SW 1/4 Sec. 13 T. 22 S N/S R. 60 E CLARK County
 PERMIT NO. 176-13-401-034
 Issued by Water Resources 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	Thick-ness
<u>ABANDON Well</u>				
<u>Depth 405 FT.</u>				
<u>Casing 8 7/8 Steel 406 ft.</u>				
<u>PERFORATE FROM BOTTOM UP TO 280 ft.</u>				
<u>Cement with Water & Cement</u>				
<u>24 SACK MIX WITH Tremie Pipe</u>				
<u>FROM BOTTOM UP TO 250 ft.</u>				
<u>Cement From 20 ft to</u>				
<u>Surface with 5 SACK MIX GROUT</u>				
<u>USED Cement Basket AT 20 FT.</u>				
<u>Plugging of log 54434</u>				
<u>N 36° 01 - 875</u>				
<u>W 115° 13 - 343</u>				
<u>North American Data 27</u>				

8. WELL CONSTRUCTION

Depth Drilled _____ Feet Depth Cased _____ Feet

HOLE DIAMETER (BIT SIZE)

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

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Depth of Seal _____
 Placement Method: Pumped Poured
 Poured

Gravel Packed: Yes No
 From _____ feet to _____ feet

Date started 08-29-07, 20
 Date completed 08-29-07, 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			

9. WATER LEVEL
 Static water level 330 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 VERNON H DIMICK Contractor
 Address 5360 N. BONITA VISTA ST Contractor
LV, NV, 89149
 Nevada contractor's license number issued by the State Contractor's Board 10062
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 552
 Signed VH Dimick
 By driller performing actual drilling on site or contractor
 Date 08-29-07