

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

STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 104883
 Permit No. _____
 Basin 212

PRINT OR TYPE ONLY

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

NOTICE OF INTENT NO. **31387**

1. OWNER **SWENSON CONSTRUCTION LLC** ADDRESS AT WELL LOCATION **818 E. FLAMINGO RD**
 MAILING ADDRESS **399 PARK AVE 8TH FLR** **LAS VEGAS, NV**
NEW YORK, NY 10022-4614

2. LOCATION **SW 1/4 SE 1/4 Sec 15 T 21 S R 61 E** **CLARK** County

PERMIT NO. **DW1245** **162-15-813-456** **CLARK**
Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other _____

4. PROPOSED USE DW
 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
Plug 2-Dewater wells				
Depth 30'				
Static water level @11'				
Casing pulled and filled with 1.5 yard of 9 sack grout to surface of each well.				
N36 .07 021				
W115 .08 735				

8. WELL CONSTRUCTION

Depth Drilled **30** Feet Depth Cased **30** Feet

HOLE DIAMETER (BIT SIZE)
 From _____ To _____
24 Inches **0** Feet **30** Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
14	36.71	0.250	0	30

Perforations:
 Type perforation **Machine**
 Size perforation **1/4"x2.5"x21 per ft.**
 From **10** feet to **30** 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 **0** feet to **30** feet

9. WATER LEVEL

Static water level **11** 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 **0018916 & 0018917**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2231**
 Signed *Victor Allen*
 By driller performing actual drilling on site or contractor
 Date **February 14, 2008**

7. WELL TEST DATE

TEST METHOD: Bail Pump Air Lift
 G.P.M. _____ Draw Down (Feet Below Static) _____ Time (Hours) _____
FEB 19 2008
LAS VEGAS OFFICE