

Log No. 105004

Permit No. _____

Basin 212

086709
 PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

6 WELLS

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. 33240

1. OWNER MISSION NEVADA INC ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 1100 FOREMASTER LN 10015 13TH ST
LAS VEGAS NV 89101 LAS VEGAS NV
 2. LOCATION SW 1/4 SW 1/4 Sec. 34 T. 20 N/S R. 61 E CLARK County
 PERMIT NO. 8-000655 139-34-401-011 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
REMOVED WELL BOXES				
PULLED CASING 2" X 25'				
FILLED FROM BOTTOM TO TOP WITH BENTONITE CHIPS				
CEMENT SEAL ON TOO				
MAP DATUM WGS 84				
36° 09.574N 115° 09.091W				
36° 09.587N 115° 09.084W				
36° 09.579N 115° 09.098W				
36° 09.610N 115° 09.098W				
36° 09.614N 115° 09.085W				
36° 09.614N 115° 09.113W				

8. WELL CONSTRUCTION

Depth Drilled _____ Feet Depth Cased _____ Feet

HOLE DIAMETER (BIT SIZE)

From		To	
Inches	Feet	Inches	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

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

Depth of Seal _____
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From _____ feet to _____ feet

Date started 12/21, 2007
 Date completed 12/21, 2007

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Time (Hours)
_____	_____
_____	_____

DO NOT DRILL RECEIVED
 MAR 14 2008
LAS VEGAS OFFICE

9. WATER LEVEL

Static water level 17 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 EBEL DRILLING SERVICES LLC Contractor
 Address 7150 PEGASO ST. Contractor
LAS VEGAS NV 89119
 Nevada contractor's license number issued by the State Contractor's Board 51266
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-2272
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 12/27/07