

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

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

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

OFFICE USE ONLY
 Log No. 105044
 Permit No. _____
 Basin 212



PRINT OR TYPE ONLY

1. OWNER HEDJE LLC
 MAILING ADDRESS 5825 El Camino Road
Las Vegas, NV 89118-2653
 ADDRESS AT WELL LOCATION Pine Street & Sunset Rd.
Las Vegas, NV

2. LOCATION SE 1/4 SE 1/4 Sec 36 T 21 S R 61 E
 PERMIT NO. 162-36-802-012 CLARK County

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
Plug 1 domestic well				
Depth 105'				
Casing 8 5/8"				
Static water level-flowing				
Top 6' bent over & broke				
Excavated down to 8' & cut off casing. Installed 10' conductor to surface & gravel pack with 30 + yards of 1.5" leach rock.				
Well casing to thin to support perforation.				
Mobilized drill rig to site & drilled out numerous bridges of mud & rock to 105', where drill bit exited through the casing into the gravel pack.				
We then pumped 3 yards of W171 slurry through a trimmie from bottom of well to top and then extracted the 10' liner.				

8. WELL CONSTRUCTION

Depth Drilled _____ Feet Depth Cased _____ Feet

HOLE DIAMETER (BIT SIZE)

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

Surface Seal: Yes No Seal Type: _____
 Depth of Seal _____
 Placement Method: Pumped Neat Cement
 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 _____

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.
 Address 4015 WEST TOMPKINS AVE
LAS VEGAS, NV 89102
 Nevada contractor's license number issued by the State Contractor's Board 18916 & 18917
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2231
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date March 6, 2008

WG88 84
 N36. 04. 430'
 W115. 06. 247'

DCNR/DWL
 RECEIVED
 MAR 7 0 2008

LAS VEGAS OFFICE

Date started 3/5, 20 08
 Date completed 3/5, 20 08

7. WELL TEST DATE

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

MAR 17 2008
 2ND TIME
 LAS VEGAS OFFICE