WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

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. 105486
Permit No.
Basin 212

NOTICE OF INTENT NO. 33530

1. OWNER COLLEGE PARK REALTY COMPANY
MAILING ADDRESS 6810 SAN VICENTE BLVD. #250 LOS ANGELES, CA. 90048-5447
ADDRESS AT WELL LOCATION 2325 N. LAS VEGAS BLVD. LV. NV. 89030

2. LOCATION NE 1/4 NE 1/4 Sec. 23 T. 20 N/S R. 61 E. CLARK County
PERMIT NO. (Issued by Water Resources) 139-23-503-004 (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	Thickness
REMOVED WELL BOX				
PULLED CASSING				
TREMIE CEMENT GROUT				
FROM BOTTOM TO TOP				
FACILITY ID NUMBER				
8-008592				
MAP DATUM				
WGS 84				
36° 12.143 N				
115° 07.208 W				

Date started 5-28, 20 08
Date completed 5-28, 20 08

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

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

8. WELL CONSTRUCTION
Depth Drilled ____ Feet Depth Cased ____ Feet

HOLE DIAMETER (BIT SIZE)
____ Inches From ____ Feet To ____ Feet
____ Inches From ____ Feet To ____ Feet
____ Inches From ____ 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
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: ☐ Yes ☐ No
Depth of Seal
Placement Method: ☐ Pumped ☐ Poured
Seal Type: ☐ Neat Cement ☐ Cement Grout ☐ Concrete Grout
Gravel Packed: ☐ Yes ☐ No
From ____ feet to ____ feet

9. WATER LEVEL
Static water level 21.5' 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 EAGLE DRILLING SERVICES LLC. (Contractor)
Address 7150 PLACID ST. LV, NV. 89119 (Contractor)
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 2357
Signed [signature] (By driller performing actual drilling on site or contractor)
Date 6-4-2008

(Rev. 12-01)

USE ADDITIONAL SHEETS IF NECESSARY

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