

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. 106307
 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. 33328

1. OWNER COUNTY OF CLARK (Aviation) ADDRESS AT WELL LOCATION 5757 Wayne Newton Blvd.
 MAILING ADDRESS PO Box 11005 Las Vegas, NV

2. LOCATION NE 1/4 NW 1/4 Sec 35 T 21 S R 61 E CLARK County

PERMIT NO. DW1276 162-35-101-020 CLARK
 Issued by Water Resources Parcel No. Subdivision Name

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

4. PROPOSED USE Dewater
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock

5. WELL TYPE
 Cable Rotary RVC
 Air Other AUGER

6. LITHOLOGIC LOG

8. WELL CONSTRUCTION

Material	Water Strata	From	To	Thick-ness
8-Dewater wells				
Sand, silt, rock		0	6	6
caliche		6	10	4
Sandy silt		10	15	5
Silty clay, rock		15	22	7
Sand, silt	x	22	28	6
Caliche		28	30	2
Silty clay		30	50	20

Depth Drilled 50 Feet Depth Cased 50 Feet
 HOLE DIAMETER (BIT SIZE)
 From _____ To _____
24 Inches 0 Feet 50 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
14		3/8	0	50

N36 05. 158'
 W115 07. 782'

Perforations:
 Type perforation Machine
 Size perforation 3/16
 From 30 feet to 50 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 50 feet

9. WATER LEVEL
 Static water level 22 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 6/30, 20 2008
 Date completed 7/2, 20 2008

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.

7. WELL TEST DATE
 TEST METHOD: Bailer Pump Air Lift
 G.P.M. DOWN (Static) Time (Hours) _____
RECEIVED
 JUL 24 2008
LAS VEGAS OFFICE

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 [Signature]
 By driller performing actual drilling on site or contractor
 Date July 21, 2008