

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

OFFICE USE ONLY
Log No. 107241
Permit No. _____
Basin 212

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

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

NOTICE OF INTENT NO. 63330

1. OWNER Herbst Development LLC ADDRESS AT WELL LOCATION 298 S. Decatur Blvd
MAILING ADDRESS 5195 Las Vegas Blvd S Las Vegas, NV 89119 CW-1 Las Vegas, NV 89107
Subdivision Name: _____ County: Clark

2. LOCATION NE 1/4 NE 1/4 Sec 36 T 20 N R 60 E Latitude 36° 10' 13.68" N UTM E NAD 27
PERMIT/WAIVER No. 13836516005 Longitude 115° 12' 22.91" W N NAD 83/WGS 84
Issued by Water Resources _____ Parcel No. _____

3. WORKED PERFORMED
 New Well Replace Recondition
 Deepen Other _____

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

5. WELL TYPE
 Cable Rotary RVC
 Other Auger

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>Back fill</u>		<u>0</u>	<u>3</u>	
<u>Caliche</u>		<u>3</u>	<u>6</u>	
<u>Sandy silt</u>		<u>6</u>	<u>13</u>	
<u>clayey silt</u>		<u>13</u>	<u>16</u>	
<u>silty sand</u>		<u>16</u>	<u>17</u>	
<u>clayey silt</u>		<u>17</u>	<u>22</u>	
<u>Silty Sand</u>		<u>22</u>	<u>25</u>	

9. WELL CONSTRUCTION

Depth Drilled 25 Feet Depth Cased 25 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
<u>8</u> Inches	<u>0</u> Feet	<u>25</u> Feet
_____ Inches	_____ Feet	_____ Feet
_____ Inches	_____ Feet	_____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2.375</u>		<u>Sch 40</u>	<u>0</u>	<u>25</u>

Perforations:

Type of perforation Factory slotted

Size of perforation .020

From 15 feet to 25 feet

From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement 1 to 11 Pumped Poured

Cement Grout _____ to _____ Pumped Poured

Concrete Grout _____ to _____ Pumped Poured

≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: Yes No 13 to 25 Pumped Poured

Type: Monterey #3 Sand

Bentonite Chips: Yes No 1 to 13 Pumped Poured

Type: 3/8 Bent chips

7. Water Level

Static water level: 22 feet below land surface

Artesian Flow: _____ G.P.M. _____ P.S.I.

Water Temperature: _____ °F

Quality: _____

8. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input checked="" type="checkbox"/> Bailor <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			<u>30 mins</u>

RECEIVED
DEC 12 2008

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name WDL Exploration & Wells Contractor

Address 570 Corinthian way Contractor

N. Las Vegas, NV

Nevada contractor's license number _____

issued by the State Contractor's Board 0012852

Nevada driller's license number issued by the Division of Water Resources, the on-site driller WT-2381

Signed _____

By driller performing actual drilling on-site or contractor

Date 12-10-08

(Rev. 05-06)

USE ADDITIONAL SHEETS IF NECESSARY