

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

OFFICE USE ONLY
Log No. **108181**
Permit No. _____
Basin _____

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. **60937**

1. OWNER **BASIC Remediation Co** ADDRESS AT WELL LOCATION **1500' SW of Athens & Galleria Rd**
MAILING ADDRESS **875 Warm Springs Rd Henderson, NV 89015** Subdivision Name: _____ County: **Clark**

2. LOCATION **SE 1/4 SE 1/4 Sec 32 T 22 N R 63 E** Latitude **UTM E 838099.54** NAD 27
PERMIT/WAIVER No. **179-05-599-003** Longitude **N 26727962.96** 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 Air Other **Sonic**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Sands with Gravel		0	110	110
Clays with Gravel	X	110	202	92
Clays with Interbedded Sand	X	202	275	73
Silt Stone		275	307	32
Clay		307	310	3
Silt Stone		310	335	25
Clay with Interbedded Sand		335	360	25
Clayey Sand	X	360	385	25

9. WELL CONSTRUCTION

Depth Drilled **385** Feet Depth Cased **382** Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To	Feet	Feet
9	0	140		
8	140	385		

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4.5	2.86	.337	0	362

Perforations:

Type of perforation **Factory Slot**

Size of perforation **.010**

From **362** feet to **382** feet

From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement to _____ Pumped Poured

Cement Grout to _____ Pumped Poured

Concrete Grout **0** to **2** Pumped Poured

≥30% Bentonite Grout **2** to **355** Pumped Poured

Gravel Pack: Yes No **359** to **385** Pumped Poured

Type: **2-16 SAND**

Bentonite Chips: Yes No **355** to **359** Pumped Poured

Type: **3/8 Chips**

Date started: **4-23** 20 **08**

Date completed: **5-30** 20 **08**

7. Water Level

Static water level: **127** feet below land surface

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

Water Temperature: _____ °F

Quality: _____

8. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

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

JUN 2 3 2008

10. DRILLER'S CERTIFICATION

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

Name **Boart Longyear Co** Contractor

Address **12225 B W Peoria Ave El Mirage, AZ 85335** Contractor

Nevada contractor's license number issued by the State Contractor's Board **0010157**

Nevada driller's license number issued by the Division of Water Resources, the on-site driller **17-2197**

Signed **Shawn Li** By driller performing actual drilling on site or contractor

Date **6-18-08**