

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

OFFICE USE ONLY
Log No. 111267
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. 33585

1. OWNER USA - US Government
MAILING ADDRESS Washington, DC

ADDRESS AT WELL LOCATION _____

Subdivision Name: _____ County: Clark

2. LOCATION NE 1/4 SE 1/4 Sec 28 T 21S N/S R 63 E Latitude 36.09276 UTM E 845487.94 NAD 27
PERMIT/WAIVER No. 160-28-801-001 Longitude -114.94291 N 26739717.94 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
 Municipal/Industrial Monitor Stock

5. WELL TYPE
 Cable Rotary RVC
 Air Other core

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Mudstone-weak, fine grained		0	8	8'
Sandstone/siltstone-fine to med. grained, weak to mod. Strong		8	30	22'
Sandstone-weak to mod. Strong fine to med. grained, pale olive to pale red to brown		30	60	30'
Sandstone- fine to med. grained slightly weathered, mod. Hard		60	90	30'
Sandstone/Siltstone- yellow gray to reddish brown, fine to med. grained, mod. strong/hard.		90	120	30'
Sandstone/Siltstone-gray to red-brown, fine to med. grained, weak to very weak		120	205	85'

9. WELL CONSTRUCTION

Depth Drilled 205 Feet Depth Cased _____ Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To
<u>6</u>	<u>0</u>	<u>205</u>

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>1 1/2</u>		<u>Sch. 40</u>	<u>0</u>	<u>192</u>

Perforations:

Type of perforation Slotted PVC

Size of perforation 10-slot

From 192 feet to 205 feet

From _____ feet to _____ feet

From _____ feet to _____ feet

From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement _____ to _____ Pumped Poured

Cement Grout 0 to 188 Pumped Poured

Concrete Grout _____ to _____ Pumped Poured

≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: Yes No 192 to 205 Pumped Poured

Type: 10 - 20

Bentonite Chips: Yes No 188 to 192 Pumped Poured

Type: _____

Date started: 25-Mar , 20 08

Date completed: 26-Mar , 20 08

7. Water Level

Static water level: n/a feet below land surface

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

Water Temperature: _____ °F

Quality: _____

8. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

10. DRILLER'S CERTIFICATION

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

Name Crux Subsurface, Inc.
Contractor

Address 16707 E. Euclid Ave., Spokane Valley, WA 99216
Contractor

Nevada contractor's license number issued by the State Contractor's Board 0060707

Nevada driller's license number issued by the Division of Water Resources, the on-site driller m-2314

Signed _____
By driller performing actual drilling on site or contractor

Date 2/24/2010