

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

OFFICE USE ONLY
 Log No. **40201**
 Permit No. **212**
 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. **11931**

1. OWNER **ARCO 1878** ADDRESS AT WELL LOCATION **ARCO**
 MAILING ADDRESS **C/o Broadvent & Assoc 2801 W. Washington**
833 Nevada Hwy BC Las Vegas Nevada
 2. LOCATION **NE 1/4 SW 1/4 Sec 29 T 20 N R 61 E Clark** County
 PERMIT NO. **MO-2211** Issued by Water Resources 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 **Auger**

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thick-ness |
|-------------------|--------------|------|------|------------|
| Silty Sand | | | | |
| Trace gravel | | 0 | 5 | 5 |
| Silty Sand w/clay | | 5 | 9.5 | 4.5 |
| Caliche | | 9.5 | 15 | 5.5 |
| Sandy Silt w/clay | | 15 | 20.5 | 5.5 |
| Caliche | | 20.5 | 21.5 | 1 |
| Silty Sand w/clay | | 21.5 | 25 | 3.5 |

I.D. = 25'

8. WELL CONSTRUCTION
 Depth Drilled **25** Feet Depth Cased **25** Feet
 HOLE DIAMETER (BIT SIZE)
 From **10** Inches To **25** Feet
 Inches Feet Feet
 Inches Feet Feet
 Inches Feet Feet
 CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|-----------|
| 4" | 2 lbs | Sch. 40 | 0 | 25 |

 Perforations:
 Type perforation **factory slotted**
 Size perforation **0.020**
 From **5** feet to **25** feet
 From feet to feet
 From feet to feet
 From feet to feet
 From feet to feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal **0.3/1-3 Bent.** Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From **3** feet to **25** feet

Date started **11-5** 19**92**
 Date completed **11-6** 19**92**

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

9. WATER LEVEL
 Static water level **13.55** 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 **Richard LeBlanc** Contractor
 Address **4670 S. Polaris Ave. Las Vegas NV 89103** Contractor
 Nevada contractor's license number issued by the State Contractor's Board **M-1817**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **M-1559**
 Signed **R. LeBlanc**
 By driller performing actual drilling on site or contractor
 Date **11-30-92**