

Log No. 44232
 Permit No. 55392
 Basin _____

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

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

NOTICE OF INTENT NO. 12455

1. OWNER Larry Powers & Tim Grushy ADDRESS AT WELL LOCATION Hickem & Juliano
 MAILING ADDRESS 3151 N. Rainbow #200
Las Vegas, Nv. 89108

2. LOCATION SE 1/4 Sec 5 T 20 N/S R 60 E Clark County
 PERMIT NO. 55392 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 _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Sand & gravel		0	3	3
cemented congl.		3	4	1
silt sand & gravel		4	18	14
clay sand & gravel		18	180	162
sand gravel & boulders		180	209	29
clay sand & gravel		209	233	24
cemented congl.		233	266	33
gravel & boulders		266	299	33
cemented congl.		299	309	10
partially cemented		309	368	59
cemented congl.		368	385	17
gravel congl.	X	385	400	15
cemented		400	470	70
gravel congl.	XX	470	500	30
cemented		500	520	20
gravel congl.		520	560	40
cemented		560	570	10

8. WELL CONSTRUCTION
 Depth Drilled 570 Feet Depth Cased 570 Feet

HOLE DIAMETER (BIT SIZE)
10 Inches 0 From 570 To _____ Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8	12.92	.188	+1	570

Perforations:
 Type perforation Torch
 Size perforation 3/16 x 6 x 4 around
 From 570 feet to 570 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 51 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 390 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 Allen Drilling Inc. Contractor
 Address 4847 So. Valley View Contractor
Las Vegas, Nv. 89103

Nevada contractor's license number issued by the State Contractor's Board 0018916
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1661

Signed Ronald Walk
 By driller performing actual drilling on site or contractor
 Date April 12, 1994

Date started 3-28 19 94
 Date completed 4-12 19 94

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift	<u>40+</u>	<u>?</u>	<u>8</u>

RECEIVED
 APR 12 1994
 DIVISION OF WATER RESOURCES
 1115 EAST FLORISSANT AVE
 LAS VEGAS, NV 89101