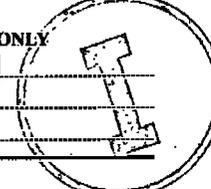


OFFICE USE ONLY
 Log No. **52151**
 Permit No. _____
 Basin **212**



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. **15868**

1. OWNER Circle K Store, Inc. ADDRESS AT WELL LOCATION Circle K Store 542
 MAILING ADDRESS 3003 N. Central Ave, 3500 E. Charleston
16th Floor, Phoenix AZ 85012 Las Vegas, Nevada
 2. LOCATION SW 1/4 SW 1/4 Sec. 31 T. 20 N/S R 62 E Clark County
 PERMIT NO. MO-2702 140-31-461-035 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: HSA

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Tan Silty Sand</u>		<u>0</u>	<u>6</u>	<u>6'</u>
<u>Mature (stratified)</u>		<u>6</u>	<u>25</u>	<u>19'</u>
<u>Silty Clay</u>				
<u>Sandy Clay</u>				
<u>Caliche</u>				

8. WELL CONSTRUCTION
 Depth Drilled 25 Feet Depth Cascd 25 Feet
 HOLE DIAMETER (BIT SIZE)
 From 11 Inches To 0 Feet 25 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4" PVC</u>		<u>1/4"</u>	<u>0</u>	<u>5</u>

Perforations:
 Type perforation Factory Slotted
 Size perforation 020
 From 5 feet to 25 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 0-5' Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 5 feet to 25 feet

9. WATER LEVEL
 Static water level: _____ feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 5-2, 19 96
 Date completed 5-2, 19 96

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 checked="" type="checkbox"/> Air Lift			

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Robert Thomason Contractor
 Address 3121 South Park Drive Contractor
Tempe AZ 85282
 Nevada contractor's license number issued by the State Contractor's Board 0041809
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1910
 Signed Robert Thomason
 By driller performing actual drilling on site or contractor
 Date 5-20-96

