

WHITE-DIVISION OF WATER RESOURCES
CANARY-CLIENT'S COPY
PINK-WELL DRILLER'S COPY

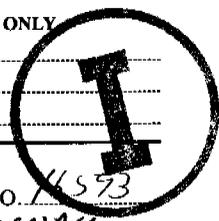
STATE OF NEVADA
DIVISION OF WATER RESOURCES

OFFICE USE ONLY

Log No. 71164

Permit No. _____

Basin. 212



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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. 11593

1. OWNER J.A. Gibbon ADDRESS AT WELL LOCATION Right-of-way Henderson

MAILING ADDRESS Haptic Development Co 3770 Hughes Howard #300 LV NV 89107

2. LOCATION SE 1/4 SE 1/4 Sec. 15 T. 21 N/S R. 62 E County _____

PERMIT NO. _____ Issued by Water Resources _____ Parcel No. 1004 Subdivision Name _____

3. WORK PERFORMED New Well Replace Recondition Deepen Abandon Other _____

4. PROPOSED USE Domestic Municipal/Industrial Irrigation Monitor Test Stock

5. WELL TYPE Cable Rotary RVC Air Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>SANDY GRAVEL COBBLES</u>		<u>0</u>	<u>40</u>	
<u>Cemented SAND, silt</u>		<u>40</u>	<u>80</u>	
<u>fine gravel w/sand</u>		<u>80</u>	<u>90</u>	
<u>water encounter 92.5</u>				
<u>COBBLES, weakly cemented sand & gravel</u>			<u>97</u>	
			<u>107</u>	
<u>SAND w/silt & gravel very dense</u>		<u>107</u>	<u>110</u>	

8. WELL CONSTRUCTION

Depth Drilled 110 Feet Depth Cased 110 Feet

HOLE DIAMETER (BIT SIZE)

From 0 To 110

6 5/8 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)
<u>2"</u>		<u>5/16</u>	<u>0</u>	<u>80</u>

Perforations: Type perforation machine slotted

Size perforation .020

From 80 feet to 110 feet

From _____ feet to _____ feet

Surface Seal: Yes No Seal Type: Neat Cement Cement Grout Concrete Grout

Depth of Seal _____

Placement Method: Pumped Poured

Gravel Packed: Yes No

From _____ feet to surface feet

9. WATER LEVEL

Static water level 92.5 feet below land surface

Artesian flow H G.P.M. _____ P.S.I.

Water temperature 70 °F Quality clear

Date started 12/11, 1997

Date completed _____, 19_____

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>2" pump</u>	<u>4</u>	<u>5</u>	<u>1 hr.</u>

10. DRILLER'S CERTIFICATION

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

Name Geotechnical & Enviro Services Contractor

Address 7560 W. Sahara 89117 Contractor

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

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2044

Signed [Signature] By driller performing actual drilling on site or contractor

Date 12/19/97