

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

OFFICE USE ONLY
 Log No. **73338**
 Permit No. _____
 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. **15150**
 ADDRESS AT WELL LOCATION **Sunsett Rd. w/o Stephanie Well No. MW 10A, 10B**

1. OWNER **Harrison Kemp Jones Chartered**
 MAILING ADDRESS **300 So. 4th Street Las Vegas, NV. 89103-6022**

2. LOCATION **1/4 NW 1/4 Sec 4 T 22 N R 62 E Clark County**
 PERMIT NO. **178-04-101-001** Parcel No. **Sunsett Village** 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	Thickness
<p><i>Casings were staged in one hole & the casings were pulled the hole drilled out and the entire hole filled with hydrated Bentonite chips</i></p>				

8. WELL CONSTRUCTION
 Depth Drilled **15** Feet Depth Cased _____ Feet
 HOLE DIAMETER (BIT SIZE)
 From **6** Inches To **15** Feet
 _____ Inches _____ Feet
 _____ Inches _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2			0	15
2			0	5

Perforations:
 Type perforation _____
 Size perforation _____
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal **15** _____ Neat Cement
 Placement Method: Pumped Poured Cement Grout Concrete Grout
 Bentonite Chips

Gravel Packed: Yes No
 From _____ feet to _____ 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 **12-7** 19**98**
 Date completed **12-7** 19**98**

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name **Teri Macdon Consultants** Contractor
 Address **4343 So. Polaris Ave. Las Vegas, Nevada 89101** Contractor
 Nevada contractor's license number _____ issued by the State Contractor's Board.
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **M-19461**
 Signed **Thomas Beall**
 By driller performing actual drilling on site or contractor
 Date **12-21-98**