

WELL DRILLER'S REPORT

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. 21948

1. OWNER Amir Development

ADDRESS AT WELL LOCATION 1501 N. Decker Las Vegas, Nevada Clark

2. LOCATION NE 1/4 NE 1/4 Sec. 25 T. 20 N. 60 E NSR 60 E County Clark
 PERMIT NO. 138-25-503-000 Parcel No. 138-25-503-000 Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other
 4. Domestic Municipal/Industrial Irrigation Test Stock Cable Rotary RVC
 Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>TYPE II</u>		<u>0</u>	<u>2</u>	<u>2</u>
<u>Silty Sand w/ Clay</u>		<u>2</u>	<u>7</u>	<u>5</u>
<u>clay</u>		<u>7</u>	<u>9</u>	<u>2</u>
<u>Silty Sand w/ Clay</u>		<u>9</u>	<u>13</u>	<u>4</u>
<u>clay</u>		<u>13</u>	<u>25</u>	<u>12</u>

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

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (feet)	To (feet)
<u>4 1/4</u>		<u>1/8</u>	<u>0</u>	<u>10</u>

Perforations: Factory Slotted
 Type perforation
 Size perforation 0.030
 From 10 feet to 25 feet
 From 10 feet to 25 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 0 feet to 25 feet

9. 15 WATER LEVEL
 Static water level: 15 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 reports true to the best of my knowledge.
 Name MPCS
 Contractor MPCS
 Address Village Center Circle St. 3-382
 Contract Las Vegas, Nevada 89134
 Nevada contractor's license number 47857
 issued by the State Contractor's Board
 Nevada driller's license number issued by the 2057
 Division of Water Resources, the on-site driller:



7. WELL TEST DATA

TEST METHOD:	<input type="checkbox"/> Bailor	<input type="checkbox"/> Pump	<input type="checkbox"/> Air Lift
G.P.M.	<input type="checkbox"/> Draw Down (Feet Below Static)		Time (Hours)

Date started 10-21-2009
 Date completed 10-21-2009
 Signed [Signature] by driller performing actual drilling on site of contractor
 Date 5-16-07