

OFFICE USE ONLY
 Log No. 84432
 Permit No. 67135
 Basin 165

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. 22759

1. OWNER Peter A. Simon 111 ADDRESS AT WELL LOCATION Vacant
 MAILING ADDRESS _____
 2. LOCATION SE 1/4 SW 1/4 Sec. 31 T 24S N/S R 60 E Clark County Clark
 PERMIT NO. 67135 204-31-000-005 Subdivision Name _____
Issued by Water Resources Parcel No.

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other _____
 4. PROPOSED USE COM
 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
Gravel		0	80	
Reddish Sandstone		80	85	
Brown Sandstone xxxxxxxx		80	85	
Brown Sandstone		85	100	
White Sandstone		100	370	
Brown ""		370	380	
Red "" ""		380	400	
Yellow ""		400	430	
Brown ""		430	460	
White ""		460	500	
Red "" ""		500	540	
Yellow ""		540	600	
Red ""		600	605	
White ""		605	620	
Brown " & Waterw	xx	620	635	

8. WELL CONSTRUCTION
 Depth Drilled 630 Feet Depth Cased 630 Feet
 HOLE DIAMETER (BIT SIZE)
 From To
12 1/4 Inches 0 Feet 55 Feet
8 3/4 Inches 55 Feet 630 Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8 5/8	16.94	.188	+2	55
6 1/2	PVC SRD 21		+1	630

Perforations:
 Type perforation Factory
 Size perforation Sieve Type .031
 From 590 feet to 630 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 55
 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 56.5 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cool °F Quality _____

Date started 10/24/01, 19_____
 Date completed 10/31/01, 19_____
 7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Vernon H. Dimick Contractor
 Address 5360 Bonita Vista St.
Las Vegas, Nev. 89149
 Nevada contractor's license number 10062
 issued by the State Contractor's Board
 Nevada driller's license number issued by the 552
 Division of Water Resources, the on-site driller
 Signed V.H. Dimick
 By driller performing actual drilling on site or contractor
 Date 10-31-01