

STATE OF NEVADA
 DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

OFFICE USE ONLY
 Log No. 84652
 Permit No. _____
 Basin 212
 NOTICE OF INTENT NO. 46650

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

1. OWNER Tosco Marketing Co.
 MAILING ADDRESS 3550 N. Central Avenue, 4th Floor
Phoenix, AZ 85012

ADDRESS AT WELL LOCATION 3401 Boulder Hwy., Las Vegas

2. LOCATION SW 1/4 SW 1/4 Sec. 6 T 21W5
 PERMIT NO. _____
 Issued by Water Resources 161-06-402-001 Parcel No.

N/S R 62E E Clark County
 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 Drpoint

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Brownish Orange D.G with multi colored rock</u>		<u>0</u>	<u>4.0'</u>	<u>4.0'</u>
<u>Brown & White clay with brown sand mix</u>		<u>4.0'</u>	<u>6.0'</u>	<u>2.0'</u>
<u>Brown & White Clay mix</u>		<u>6.0'</u>	<u>10.0'</u>	<u>4.0'</u>
<u>Brown & Dark Green Clay</u>		<u>10.0'</u>	<u>11.0</u>	<u>1.0</u>
<u>G.P-13 T.D 11.0</u>				

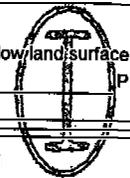
8. WELL CONSTRUCTION
 Depth Drilled 11.0 Feet Depth Cased 11.0 Feet
 HOLE DIAMETER (BIT SIZE)
 From 6 Inches To 0 Feet
2-1/4 Inches 6' Feet 11.0 Feet
 Inches Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>34"</u>	<u>.278</u>	<u>sch 80 pvc</u>	<u>0</u>	<u>11.0</u>

Perforations:
 Type perforation factory sawed
 Size perforation .010
 From 7.0 feet to 11.0 feet
 From _____ feet to _____ feet

Surface Seal: Yes No
 Depth of Seal 5.0' Bent/Grout
 Placement Method: Pumped Poured
 Seal Type: Neat Cement Cement Grout Concrete Grout
 Gravel Packed: Yes No
 From 11.0 feet to 7.0' feet



Date started 11/01/2001, 19
 Date completed 11/03/2001, 19

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

7. WELL TEST DATA

TEST METHOD:	TEST METHOD:		Time (Hours)
	G.P.M.	Draw Down (Feet Below Static)	
<input type="checkbox"/> Bailer			
<input type="checkbox"/> Pump			
<input 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 A.S.A.P Pump & Well Service Contractor
 Address P.O Box 60130 Contractor
Reno, Nevada 89506
 Nevada contractor's license number issued by the State Contractor's Board 0035387-B
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2066
 Signed Steve Welch
 By driller performing actual drilling on-site or contractor
 Date 11/04/2001