

OFFICE USE ONLY

Log No. 89085
 Permit No. _____
 Basin 212

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. 24492

1. OWNER K. B. HAME ADDRESS AT WELL LOCATION 6770 N. DAPPLE GRAY RD LAS VEGAS NV 89149
 MAILING ADDRESS 750 PIONEER RD. SUITE F LAS VEGAS, NV

2. LOCATION NW 1/4 SW 1/4 Sec. 20 T. 19 N/S R. 60 E CLARK County
 PERMIT NO. 125-20-301-003 Issued by Water Resources Parcel No. 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
PULL PUMP FROM WELL, PUMP SET AT 320'				
STATIC WATER LEVEL WAS 250'				
PERFORATED WELL FROM 320 TO 200 PERFORATIONS ARE 3" KING BY 3/8" WIRE PERFORATED 4 TIMES PER FOOT				
WELL WAS USING TROMMIE HOSE FROM BOTTOM OF WELL WITH 21 SACK NEAT CEMENT FROM ZWICKER MAT. NEAT CEMENT WAS PUMPED BY BEDROCK PUMPING.				
TROMMIE HOSE CONSISTED OF 2" X 0.054 WALL THICKNESS MANUFACTURER OF HOSE SUNFLOW INC CODE SF-10				
DCNR/DWR RECEIVED				
APR 22 2003				
LAS VEGAS OFFICE				

8. WELL CONSTRUCTION

Depth Drilled _____ Feet Depth Cased _____ Feet

HOLE DIAMETER (BIT SIZE)

From _____ To _____
 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)

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

Date started 04/02, 2003
 Date completed 04/09, 2003

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

9. WATER LEVEL

Static water level _____ 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 report is true to the best of my knowledge.

Name EAGLE DRILLING SERVICES Contractor
 Address 7150 PLACIO ST. LAS VEGAS NV 89119 Contractor

Nevada contractor's license number issued by the State Contractor's Board 51266
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2202

Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 4-15-03