

OFFICE USE ONLY
 Log No. 89168
 Permit No. 19922
 Basin 21B

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. **24313**

1. OWNER **LAKEMead NATIONAL PARK SERVICE** ADDRESS AT WELL LOCATION **COTTONWOOD COVE**
 MAILING ADDRESS **601 NEVADA HIGHWAY** **BOULDER CITY, NV 89005-7426**
 2. LOCATION **NW SW 24 T 28 N/S R. 65 E CLARK** County
 PERMIT NO. **19922** 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	Thick-ness
Recondition 1-172' well				
Casing dia 10"				
Static 13'				
Perforate from 97' to 172'				
Perforations were cleaned using sonar jet method.				
Cleaning sample were retrieved and showed excellent cleaning results and good coarse water sand.				
Well depth changed after cleaning to 169' and static remained at 13'				

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
 From..... feet to..... feet
 From..... feet to..... feet
 From..... feet to..... feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From..... feet to..... feet

Date started..... 3/29/03....., 20.....
 Date completed..... 3/31/03....., 20.....

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..... **ALLEN DRILLING INC.** Contractor
 Address..... **4015 WEST TOMPKINS** Contractor
LAS VEGAS, NV 89103
 Nevada contractor's license number issued by the State Contractor's Board..... **18917**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller..... **1301**
 Signed..... *Fred B. Allen*
 By driller performing actual drilling on site or contractor
 Date..... 4/8/03

3/29/03 11:58 AM
 DIVISION OF WATER RESOURCES
 LAS VEGAS OFFICE
 DGNR/DWR RECEIVED
 APR 14 2003
 LAS VEGAS OFFICE