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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. 24822

1. OWNER Nat'l Nuc. Sec. Admin/NV Site Of ADDRESS AT WELL LOCATION Well # NLVF-12s
 MAILING ADDRESS P.O. Box 98518 2621 Losee Rd
Las Vegas, NV 89193-8518 No. Las Vegas, NV 89030-4134
 2. LOCATION NE 1/4 SE 1/4 Sec. 15 T. 20S N/S R. 61 E Clark County
 PERMIT NO. 139-15-701-001 N/A 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 Auger

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Fill (silt w/some fine, well-sorted sand layers)</u>	<u>N</u>	<u>0</u>	<u>10</u>	<u>10</u>
<u>Silt; greenish-gray sandy, trace clay</u>	<u>N</u>	<u>10</u>	<u>15</u>	<u>5</u>
<u>Silty sand; grayish-yell-grn slightly firm</u>	<u>N</u>	<u>15</u>	<u>20</u>	<u>5</u>
<u>Sandy silt; w/some silty clay layers, yell-gray to pale olive</u>	<u>Y</u>	<u>20</u>	<u>34</u>	<u>14</u>

8. WELL CONSTRUCTION
 Depth Drilled 37.00 Feet Depth Cased 38.99 Feet
 HOLE DIAMETER (BIT SIZE)

	From	To
<u>8.50</u> Inches	<u>0</u> Feet	<u>43.25</u> Feet
<u>13.50</u> Inches	<u>0</u> Feet	<u>37.00</u> Feet
<u>17.00</u> Inches	<u>0</u> Feet	<u>5.50</u> Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>12.75</u>	<u>49.56</u>	<u>.375</u>	<u>+1.35</u>	<u>5.15 BGL</u>
<u>4.50</u>	<u>2.0</u>	<u>0.237</u>	<u>+1.05</u>	<u>38.99 BGL</u>

Perforations:
 Type perforation Pre-sanded slotted screen
 Size perforation .040 (20-40 Filter Pack)
 From 20.11 feet to 34.47 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal 13.90
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 8910-13.9 feet to 38.99 feet

9. WATER LEVEL
 Static water level 16.30 feet below land surface
 Artesian flow No G.P.M. _____ P.S.I. _____
 Water temperature Cold °F Quality _____

Date started 4/09/2003
 Date completed 4/10/2003

7. WELL TEST DATA

TEST METHOD:	Bailer	Pump	Air Lift
G.P.M.	Draw Down (Feet Below Static)	Time (Hours)	
	<u>N</u>		
	<u>A</u>		

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Bechtel Nevada Contractor
 Address P.O. Box 98521 Contractor
Las Vegas, NV 89193-8521
 Nevada contractor's license number issued by the State Contractor's Board 0048068
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2239
 Signed Jeffrey M. Dean
 Driller performing actual drilling on site or contractor
 Date 5-09-03