

OFFICE USE ONLY
 Log No. 89613
 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. 24780

1. OWNER FREHNER CONSTRUCTION ADDRESS AT WELL LOCATION OWENS & E. S.
 MAILING ADDRESS 4040 FREHNER RD. (ROAD PARCEL) LAS VEGAS, NV
LAS VEGAS, NV 89130

2. LOCATION SW 1/4 SW 1/4 Sec. 22 T. 20 N/S R. 61 E CLARK County
 PERMIT NO. DW1158 139-21-899-023 Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other Dewater

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
<u>3-4' Dewater wells</u>				
<u>Type II road base</u>		<u>0'</u>	<u>1'</u>	<u>1'</u>
<u>Silt</u>		<u>1'</u>	<u>14'</u>	<u>13'</u>
<u>Caliche</u>		<u>14'</u>	<u>16'</u>	<u>2'</u>
<u>White silty clay</u>	<u>X</u>	<u>16'</u>	<u>37'</u>	<u>21'</u>
<u>white clay</u>		<u>37'</u>	<u>40'</u>	<u>3'</u>

8. WELL CONSTRUCTION
 Depth Drilled 40' Feet Depth Cased 40' Feet

HOLE DIAMETER (BIT SIZE)
 From 0' To 40' Feet
24" 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)
<u>14</u>	<u>36.71</u>	<u>1.250</u>	<u>0'</u>	<u>40'</u>

Perforations: Machine
 Type perforation 1/4" x 2 1/2" x 3 rows @ 13'
 Size perforation 40'

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 40'
 From _____ feet to _____ feet

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

Date started 4/30/03, 20 _____
 Date completed 5/2/03, 20 _____

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
ALLEN DRILLING INC.
 Name _____ Contractor
 Address 4013 West Tompkins Ave. 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 ABDS2161

Signed David [Signature]
 By driller performing actual drilling on site or contractor
 Date 5/21/03