

OFFICE USE ONLY
 Log No. 89749
 Permit No. _____
 Basin 212
 24784
 2479

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. 2479

1. OWNER FREHNER CONSTRUCTION ADDRESS AT WELL LOCATION OWENS & FET.
 MAILING ADDRESS 4040 FREHNER RD. (ROAD PARCEL) LAS VEGAS, NV
LAS VEGAS, NV 89030
 2. LOCATION SW 1/4 Sec. 22 T. 20 N/S R. 61 E. CLARK County
 PERMIT NO. DW1139 139-22-899-004
 Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other De-water
 4. PROPOSED USE De-water
 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>2-1/2' x</u> <u>7-40' De-water wells</u>				
<u>Type II road base</u>		<u>0'</u>	<u>1'</u>	<u>1'</u>
<u>Silt</u>		<u>1'</u>	<u>9'</u>	<u>8'</u>
<u>Caliche</u>		<u>9'</u>	<u>14'</u>	<u>5'</u>
<u>White silty clay</u>	<u>x</u>	<u>14'</u>	<u>35'</u>	<u>21'</u>
<u>white clay</u>		<u>35'</u>	<u>40'</u>	<u>5'</u>

8. WELL CONSTRUCTION
 Depth Drilled 40' Feet Depth Cased _____ Feet
 HOLE DIAMETER (BIT SIZE)
 From _____ To _____
24" Inches _____ Feet _____ Feet
 _____ Inches 0' Feet 40' 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:
 Type perforation Machine
 Size perforation 1/4" x 2 1/2" x 3 rows @ 13'
 From 20' feet to 40' 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
 Depth of Seal _____
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 0' feet to 40' 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 5/27/03, 20 _____
 Date completed 5/29/03, 20 _____

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<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.
ALLEN DRILLING INC.
 Name _____
 Contractor
 Address 4015 West Tompkins Ave.
LAS VEGAS, NV 89103
 Contractor
 Nevada contractor's license number 18917
 issued by the State Contractor's Board
 Nevada driller's license number issued by the 1301
 Division of Water Resources, the on-site driller
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 6/30/03