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STATE OF NEVADA

DIVISION OF WATER RESOURCES

# WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

OFFICE USE ONLY
Log No. 92364
Permit No.
Basin 212

NOTICE OF INTENT NO. 25484

1. OWNER WL HOMES LLC
MAILING ADDRESS 4435 S JONES #1
LAS VEGAS, NV 89103

ADDRESS AT WELL LOCATION DESERT INN & CABANA
LAS VEGAS, NV

2. LOCATION SE ¼ SE ¼ Sec 15 T 21 S R 62 E CLARK County

PERMIT NO. DW1153 (Issued by Water Resources) | 151-15-801-001/002 (Parcel No.) | DI PLANNED COMM (Subdivision Name)

3. WORK PERFORMED
☐ New Well ☐ Replace ☐ Recondition
☐ Deepen ☒ Abandon ☐ Other

4. PROPOSED USE Dewater
☐ Domestic ☐ Irrigation ☐ Test
☒ Municipal/Industrial ☐ Monitor ☐ Stock

5. WELL TYPE
☐ Cable ☐ Rotary ☐ RVC
☐ Air ☐ Other

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thickness |
|---|---|---|---|---|
| Plug 20-30' dewater wells | | | | |
| Depth 30' | | | | |
| Pulled casing with crane | | | | |
| no access for drill rig. | | | | |
| Placed 1.5 yards of 9 | | | | |
| sack cement slurry into | | | | |
| each well. Top of each | | | | |
| well covered by 6' of | | | | |
| type II seal by contractor. | | | | |

DCNR/DWR
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FEB 17 2004
LAS VEGAS OFFICE

Date started 1/27, 20 04
Date completed 1/27, 20 04

7. WELL TEST DATE

TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

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

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:
Depth of Seal ☐ Neat Cement
Placement Method: ☐ Pumped ☐ Cement Grout
☐ Poured ☐ Concrete Grout
Gravel Packed: ☐ Yes ☐ No
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

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 TOMPLKINS AVE (CONTRACTOR)
LAS VEGAS, NV 89103
Nevada contractor's license number issued by the State Contractor's Board 0018916 & 0018917
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1301
Signed Fred D. Allen II
By driller performing actual drilling on site or contractor
Date 2/9/04


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