

2 wells

WHITE-DIVISION OF WATER RESOURCES
CANARY-CLIENT'S COPY
PINK-WELL DRILLER'S COPY

STATE OF NEVADA
DIVISION OF WATER RESOURCES

OFFICE USE ONLY
Log No. 92578
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. 25807

1. OWNER D. Keith ADDRESS AT WELL LOCATION 5757 WAYNE NEWTON Blvd.
 MAILING ADDRESS PO. Box 36611 HDO-7FM DALLAS, TX LAS VEGAS, NV
 2. LOCATION NW 1/4 NW 1/4 Sec. 34 T 21 N/S R 61 E CLARK County
 PERMIT NO. 162-34-101-001 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
① REMOVE WELL WALLS				
② Pull CASING.				
③ ABANDON from BOTTOM TO TOP w/NEAT CEMENT.				

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

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Placement Method: Pumped Poured
 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 EAGLE DRILLING Contractor
 Address 7150 PLACID ST Contractor
LAS VEGAS, NV 89119
 Nevada contractor's license number issued by the State Contractor's Board 57266
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2202
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 1-28-04

Date started 11-17, 2003
 Date completed 11-17, 2003

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			