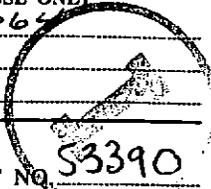


OFFICE USE ONLY
 Log No. 9286
 Permit No. _____
 Basin 104


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. 53390

1. OWNER LAS VEGAS PAVING ADDRESS AT WELL LOCATION WEST SIDE OF
 MAILING ADDRESS 4420 S. DELATOUR SOUTH OF DELATOUR NORTH SIDE SHINWAY
LAS VEGAS NV ON LONPA WEST SIDE

2. LOCATION SW 1/4 NW 1/4 Sec 09 T. 15 S. R. 20 E County _____
 PERMIT NO. DEW-43 Parcel No. _____ Subdivision Name CARSON CITY NV

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

4. PROPOSED USE TEMP DENAT
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock

5. WELL TYPE
 Cable Rotary RVC
 Air Other BUCKET

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>ABANDON (9) WELLS ON LONPA</u>				
<u>PULL CASING</u>				
<u>VACUUM Gravel pack from</u>				
<u>SURFACE TO 10'</u>				
<u>CEMENT GROUT Seal from 10'</u>				
<u>To Surface.</u>				
RECEIVED 04 MAR 10 AM 11:38 STATE ENGINEERS OFFICE				

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

HOLE DIAMETER (BIT SIZE)
 From 24" Inches 0 Feet 40 Feet
 To _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

* CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8"</u>	<u>ASTM</u>	<u>F-480</u>	<u>0</u>	<u>40</u>

Perforations:
 Type perforation Slot
 Size perforation .092
 From 20 feet to 40 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 10' G SURFACE Neat Cement
 Placement Method: Pumped Tremie Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From 10 feet to 40 feet

Date started 3-4 NOY
 Date completed 3-4 NOY

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			

9. WATER LEVEL
 Static water level 10' feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cool °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 GRIFFIN Dewatering Contractor
 Address 560 E HATLAND Contractor
Ontario Cal 91761
 Nevada contractor's license number issued by the State Contractor's Board 31246
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller ABDS-2150
 Signed Ed Jannice
 By driller performing actual drilling on site or contractor
 Date 3.4.04