

PRINT OR TYPE ONLY
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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. **26916**

1. OWNER **NV Power Company** ADDRESS AT WELL LOCATION **Reidgardner**
 MAILING ADDRESS **6226 W Sahara Ave Las Vegas, NV 89146** **501 Wally Kayway Moapa, NV 89025**
 2. LOCATION **NE 1/4 SW 1/4 Sec. 5 T. 15 N. R. 66 E Clark** County
 PERMIT NO. **04205301005** 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
Silty sand		0	5'	
Sand		5	17'	
Sandy gravel		17	22	
Clay	17'	22	27	

8. WELL CONSTRUCTION
 Depth Drilled **27** Feet Depth Cased **27** Feet
 HOLE DIAMETER (BIT SIZE)
 From **8** Inches To **0** Feet **27** Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4	PVC	sch 40	0	27

Perforations:
 Type perforation **Factory slot**
 Size perforation **.020**
 From **12** feet to **27** feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal **10' to surface** Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From **10** feet to **27** feet

9. WATER LEVEL
 Static water level **17** 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 **Elite Drilling Inc.** Contractor
 Address **4255 W. Post rd. Las Vegas, NV 89118** Contractor
 Nevada contractor's license number issued by the State Contractor's Board **0054931**
 Nevada driller's license number issued by the Division of Water Resources to the on-site driller **M-1869**
 Signed **[Signature]**
 By driller performing actual drilling on site or contractor
 Date **7-27-05**

Date started **July 11** 2005
 Date completed **July 11** 2005

7. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

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

DCNR/DWR
 RECEIVED

AUG 3 2005

LAS VEGAS OFFICE