

- COPIES TO
 - DIVISION OF WATER RESOURCES
 - CLIENT'S COPY
 - WELL DRILLER'S COPY

STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 99249
 Permit No. 51213
 Basin 212

PRINT OR TYPE ONLY

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

NOTICE OF INTENT NO. 28423

1. OWNER **FETT THOMAS M**
 MAILING ADDRESS 9624 SULTANA ST
LAS VEGAS, NV 89139
 ADDRESS AT WELL LOCATION 9624 SULTANA ST
LAS VEGAS, NV

2. LOCATION SW 1/4 SW 1/4 Sec 20 T 22 S R 61 E **CLARK** County
 PERMIT NO. 51213 alg **177-20-403-008**
 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 |
|---|--------------|------|----|------------|
| Abandon 1 domestic well | | | | |
| Depth 374' | | | | |
| Casing 8 5/8" | | | | |
| Static water level 205' | | | | |
| Perforate from 350 to 50' | | | | |
| Trimmie 7 yards of W171 slurry to top of well | | | | |
| PLUGGED BY GWMP ORIG/PLUG LOG # <u>27230</u> | | | | |
| DCNR/DWR RECEIVED MAY 12 2006 | | | | |
| LAS VEGAS OFFICE | | | | |

8. WELL CONSTRUCTION

Depth Drilled _____ Feet Depth Cased _____ Feet

HOLE DIAMETER (BIT SIZE)

| From | | To | |
|--------|-------|--------|-------|
| Inches | Feet | Inches | 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 |
|-------|---------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

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 ALLEN DRILLING INC.
 (CONTRACTOR)

Address 4015 WEST TOMPKINS AVE
 (CONTRACTOR)
LAS VEGAS, NV 89103
 Nevada contractor's license number issued by the State Contractor's Board 18916 & 18917
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2267

Signed Allen B. Allen
 By driller performing actual drilling on site or contractor
 Date 5/8/06

Date started 3/13, 2006
 Date completed 4/14, 2006

7. WELL TEST DATE

| TEST METHOD: | Bailer | | Pump | | Air Lift | |
|--------------|--------|-------------------------------|--------|-------------------------------|--------------|--------------|
| | G.P.M. | Draw Down (Feet Below Static) | G.P.M. | Draw Down (Feet Below Static) | Time (Hours) | Time (Hours) |
| _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ | _____ | _____ |