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

009619

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

3 WELLS

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. 101746
Permit No.
Basin 212

NOTICE OF INTENT NO. 20662

1. OWNER ERIC ROEHL
MAILING ADDRESS 145 S STATE COLLEGE BLVD BREA CA

ADDRESS AT WELL LOCATION 3805 E. FLAMINGO RD. LAS VEGAS, NV

2. LOCATION NW ¼ NE ¼ Sec. 19 T. 21 N/S R. 62 E. CLARK County
PERMIT NO. Issued by Water Resources | Parcel No. 161-19-501-001 | 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	Thickness
REMOVED WELL				
BOXES				
PULLED CASING				
FILLED FROM BOTTOM				
TO TOP WITH				
BENTONITE CHIPS				
CEMENT SEAL ON				
TOP				
MAP DATUM				
WGS 84				
MW-3A 36°06.885 N 115°05.490 W				
MW-2A 36°06.899 N 115°05.483 W				
MW-1A 36°06.903 N 115°05.494 W				

DCNR/DWR
RECEIVED
DEC 0 1 2006
LAS VEGAS OFFICE

Date started 11/28, 2006
Date completed 11/28, 2006

7. WELL TEST DATA
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
Depth of Seal
Placement Method: ☐ Pumped ☐ Poured
Seal Type: ☐ Neat Cement ☐ Cement Grout ☐ 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 EAGLE DRILLING SERVICES LLC (Contractor)
Address 7150 PLACID ST. (Contractor)
LAS VEGAS NV. 89119
Nevada contractor's license number issued by the State Contractor's Board 51266
Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-2272
Signed ____ (By driller performing actual drilling on site or contractor)
Date 11/29/06

(Rev. 12-01) USE ADDITIONAL SHEETS IF NECESSARY (O)-627