20 wells

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

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

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. 102020
Permit No.
Basin 212

NOTICE OF INTENT NO. 30722

1. OWNER 99th CES/CEV Nellis AFB
MAILING ADDRESS 4349 Duffer Dr, Suite 1601, Nellis AFB, NV 89191
ADDRESS AT WELL LOCATION Building 60937, Nellis AFB, NV 89191

2. LOCATION NW ¼ SW ¼ Sec. 10 T. 20 N/S R. 62 E. Clark County
PERMIT NO. R-1306A (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 Auger

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
1) Attempt to Pull Casing				
2) Cement 1¼ ARC injection				
line into place. 20 total				
wells. Wells used for				
Remedial Purposes				

DOCUMENTS RECEIVED
LAS VEGAS OFFICE

Date started 10/23/2006
Date completed 10/25/2006

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 NA 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 (Contractor) WDC Exploration & Wells
Address (Contractor) 570 Corinthian Way
N. Las Vegas, NV 89030
Nevada contractor's license number issued by the State Contractor's Board 0012852
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2057
Signed ____ By driller performing actual drilling on site or contractor
Date 12/18/06

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