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. 103401
Permit No.
Basin 212

NOTICE OF INTENT NO. 26710

1. OWNER CLARK COUNTY SANITATION
MAILING ADDRESS 5857 E. FLAMINGO RD.
LAS VEGAS, NEVADA 89122

ADDRESS AT WELL LOCATION 5857 E. FLAMINGO RD.
LAS VEGAS, NEVADA 89122

2. LOCATION ¼ NW ¼ Sec. 22 T. 21 N/S R. 62 E. CLARK County
PERMIT NO. DW 1208 Issued by Water Resources | 161-22-101-001 Parcel No. | Subdivision Name

3. WORK PERFORMED
☐ New Well ☐ Replace ☐ Recondition
☐ Deepen ☒ Abandon ☐ Other

4. PROPOSED USE
☒ DEWATERING ☐ Domestic ☐ Irrigation ☐ Test
☐ Municipal/Industrial ☐ Monitor ☐ Stock

5. WELL TYPE
☐ Cable ☐ Rotary ☐ RVC
☐ Air ☒ Other BUCKET

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thickness |
|---|---|---|---|---|
| 10 WELLS | | | | |
| EXTRACTED CASINGS FILLED | | | | |
| BOREHOLE FROM -10' TO | | | | |
| GROUND SURFACE W/ CONCRETE | | | | |

DCNR/DWR RECEIVED AUG 21 2007 LAS VEGAS OFFICE

Date started JULY 26, 2007, 19
Date completed JULY 26, 2007, 19

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 KELLEY DEWATERING (Contractor)
Address 517S CLAY (Contractor)
WYOMING, MI. 49548
Nevada contractor's license number issued by the State Contractor's Board 50826
Nevada driller's license number issued by the Division of Water Resources, the on-site driller ABDS 2149
Signed [signature] (By driller performing actual drilling on site or contractor)
Date 8-4-07

(Rev. 3-91) USE ADDITIONAL SHEETS IF NECESSARY (O)-627