

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

OFFICE USE ONLY
Log No. 103511
Permit No. _____
Basin 212



PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

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

NOTICE OF INTENT NO. 31425

1. OWNER Clark County Aviation ADDRESS AT WELL LOCATION McCarren Airport Terminal 3
MAILING ADDRESS P.O. Box 11005 5757 Wanye Newton Boulevard, Las Vegas, NV
Las Vegas, Nv Subdivision Name: _____ County: Clark

2. LOCATION NW ¼ NW ¼ Sec 35 T 21S N/S R 61 E Latitude _____ UTM E NAD 27
PERMIT/WAIVER No. DW-1244A 162-35-101-018 Longitude _____ N x NAD 83/WGS 84
Issued by Water Resources Parcel No. 162-35-101-018

3. WORKED PERFORMED 4. PROPOSED USE DEWATER 5. WELL TYPE
New Well Replace Recondition Domestic Irrigation Test Cable RVC
Deepen x Other Dewatering Well Municipal/Industrial Monitor Stock Air x Other Auger Bucket

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Well # 7423				
N486735.1 E633311.2				
Clayey Gravel		0	4	
Caliche - white/hard		4	8	
Fat Clay-with sand, gravel		8	18	
Silty Clayey Sand - red,brown		18	21	
Clayey Gravel, cemented lenses		21	34	
Sandy Fat Clay, brown to tan		34	47	
Caliche - moderate cemented		47	49	
Caliche - hard		49	51	
Well #7424				
N486798.2 E633390.3				
Clayey Gravel		0	4	
Caliche - white/hard		4	8	
Fat Clay-with sand, gravel		8	18	
Caliche - white/hard		18	21	
Clayey Gravel, cemented lenses		21	34	
Sandy Fat Clay, brown to tan		34	47	
Caliche - moderate cemented		47	49	
Caliche - hard		49	51	

9. WELL CONSTRUCTION

Depth Drilled	51'	Feet	Depth Cased	50'	Feet
HOLE DIAMETER (BIT SIZE)					
24"		Inches	From surface	Feet	To 51' BGL
		Inches		Feet	
		Inches		Feet	
CASING SCHEDULE					
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)	
6.5	3.6	.280	0	20	

Perforations:
Type of perforation machine slot
Size of perforation .032"
From 20 feet to 50 feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Annular Seal: Yes X No
Neat Cement _____ to _____ Pumped Poured
Cement Grout _____ to _____ Pumped Poured
Concrete Grout _____ to _____ Pumped Poured
≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: X Yes No _____ to _____ Pumped X Poured
Type: pea gravel

Bentonite Chips: Yes X No _____ to _____ Pumped Poured
Type: _____

Date started: 24-Jul, 20 07
Date completed: 24-Jul, 20 07

7. Water Level
Static water level: 26' feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ °F
Quality: _____

8. WELL TEST DATA

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

**DCNR/DWR
RECEIVED**

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Griffin Dewatering Corp Contractor
Address 536 E. Maitland Street Contractor
Ontario, Ca 91761
Nevada contractor's license number issued by the State Contractor's Board C-23 0031246
Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-2264
Signed [Signature] By driller performing actual drilling on site or contractor
Date 7/31/07

(Rev. 05-00)

AUG 03 2007

USE ADDITIONAL SHEETS IF NECESSARY

LAS VEGAS OFFICE