

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. **106795**  
 Permit No. \_\_\_\_\_  
 Basin **212**  
 NOTICE OF INTENT NO. **33942**

PRINT OR TYPE ONLY

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

1. OWNER **CLARK COUNTY SANITATION** ADDRESS AT WELL LOCATION **CCWRD #567**  
 MAILING ADDRESS **5857 E FLAMINGO RD. LAS VEGAS, NV 89122** **5857 East Flamingo Road, Las Vegas, NV**

2. LOCATION **NE 1/4 NE 1/4 Sec 22 T 21 S R 62 E** **CLARK** County

PERMIT NO. **DW1281** **161-22-101-001** **CLARK**  
Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Abandon  Other \_\_\_\_\_  
 4. PROPOSED USE **DEWATER**  
 Domestic  Irrigation  Test  
 Municipal/Industrial  Monitor  Stock  
 5. WELL TYPE  
 Cable  Rotary  RVC  
 Air  Other **Auger**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<b>6-Dewater wells</b>				
Silt	x	0	12'	12'
Silty-clay	x	12	35'	23
Silty-clay		35'	45'	10
<b>wells 35 to 40</b>				
<b>WSG84</b>				
<b>N36 06 660'</b>				
<b>W115 10 628'</b>				

8. WELL CONSTRUCTION  
 Depth Drilled **45** Feet Depth Cased **45** Feet  
 HOLE DIAMETER (BIT SIZE)  
 From **24** Inches To **0** Feet **45** Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>14</b>	<b>36.71</b>	<b>0.250</b>	<b>0</b>	<b>45</b>

Perforations:  
 Type perforation **Machine**  
 Size perforation **1/4"x2.5"x21 per ft.**  
 From **10** feet to **45** feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal \_\_\_\_\_  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From **0** feet to **45** feet

9. WATER LEVEL  
 Static water level **11** feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started **8/26, 20 2008**  
 Date completed **9/22, 20 2008**

7. WELL TEST DATE

TEST METHOD:	Draw Down		
	G.P.M.	(Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer			
<input type="checkbox"/> Pump			
<input type="checkbox"/> Air Lift			

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 **0018916 & 0018917**  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2231**  
 Signed *Victor Allen Estes*  
 By driller performing actual drilling on site or contractor  
 Date **September 30, 2008**

