

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

OFFICE USE ONLY
Log No. 107356
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

1. OWNER TROCK - SUSAN CRAWLEY ADDRESS AT WELL LOCATION TROCK PLANT NOTICE OF INTENT NO. 63206
MAILING ADDRESS 8000 W. LAKE MEAD PKWY HENDERSON, NV 89015 8000 W. LAKE MEAD PKWY, HENDERSON, NV 89015 Subdivision Name: _____ County: CLARK
2. LOCATION SW 1/4 NW 1/4 Sec 12 T 22 N R 62 E Latitude 36°03.174' UTM E NAD 27
PERMIT/WAIVER No. H-000540 17812201005 Longitude 115°00.573' N NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

3. WORKED PERFORMED New Well Replace Recondition Deepen Other
4. PROPOSED USE Domestic Irrigation Test Monitor EXT Municipal/Industrial Stock
5. WELL TYPE Cable Rotary RVC Air Other SONIC

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>TAN COLORED SANDY SILT - CALICHE LENSES</u>				
<u>SOME GRAVELS SUSPENDED</u>		<u>0</u>	<u>31</u>	<u>31</u>
<u>DARK BROWN CLEAN COARSE SAND SOME SILT TOWARDS BOTTOM</u>				
<u>SAND LENS</u>	<u>*</u>	<u>31</u>	<u>51</u>	<u>20</u>
<u>RED, DENSE CLAY w/ SOME SILTS</u>		<u>51</u>	<u>55</u>	<u>4</u>

9. WELL CONSTRUCTION
Depth Drilled 55 Feet Depth Cased 54 Feet
HOLE DIAMETER (BIT SIZE)
From 10 Inches To 0 Feet
From 0 Feet To 55 Feet
From _____ Feet To _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6</u>		<u>SCHD 80 PVC</u>	<u>0</u>	<u>31</u>
<u>6</u>		<u>" " "</u>	<u>51</u>	<u>54</u>

Perforations:
Type of perforation PVC SCREEN
Size of perforation .040
From 31 feet to 51 feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Annular Seal: Yes No
 Neat Cement 0 to 26 Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: Yes No 29 to 55 Pumped Poured
Type: MONTENEY # 6x9
Bentonite Chips: Yes No 26 to 29 Pumped Poured
Type: 3/8 HOLE PLUG

Date started: 9-23, 20 08
Date completed: 9-24, 20 08

7. Water Level
Static water level: 29 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ °F
Quality: _____

8. WELL TEST DATA

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

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name BOART LEVY YEAR E & T Contractor
Address 3894 RAILROAD AVE. Contractor
Yuba City, CA 95981
Nevada contractor's license number _____
issued by the State Contractor's Board 0021976
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2234
Signed [Signature]
By driller performing actual drilling on-site or contractor
Date 10-2-08