

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

OFFICE USE ONLY
Log No. 107967
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 Michael Sturdivant / City of Las Vegas ADDRESS AT WELL LOCATION Fulton BL. right of way west of S. Valley View Blvd.
MAILING ADDRESS 400 Stewart Las Vegas NV. 89101 Subdivision Name: _____ County: CLARK

NOTICE OF INTENT NO. 26779

2. LOCATION 3W 1/4 SE 1/4 Sec 31 T 20 N 61 E Latitude 36.16289 UTM E NAD 27
PERMIT/WAIVER No. M0-2794 139-31-899-009 Longitude -115.19517 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 Stock
 Municipal/Industrial Monitor

5. WELL TYPE
 Cable Rotary RVC
 Air Other Auger

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Asphalt		0	6"	6"
Brown silty gravel with sand		6"	2'	1.5'
Sandy silty clay		2'	4'	2'
Sandy clay with gravel		4'	7'	3'
Light Brown sand with clay		7'	10'	3'
Light Brown clay + sand	✓	10'	28'	18'
Hard Light Brown Caliche	✓	28'	30'	1.5'

9. WELL CONSTRUCTION

Depth Drilled	Feet	Depth Cased	Feet
30			

HOLE DIAMETER (BIT SIZE)

Inches	From	Feet	To	Feet
12	0		30	

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
5.5	2.7	.258	0	9.5
2.5	.7	.154	0	9.5

Perforations:

Type of perforation Slotted
Size of perforation .020

From	feet to	feet
4.5	29.5	
9.5	29.5	

Annular Seal: Yes No

Neat Cement to _____ Pumped Poured
 Cement Grout to _____ Pumped Poured
 Concrete Grout to _____ Pumped Poured
 ≥30% Bentonite Grout to _____ Pumped Poured

Gravel Pack: Yes No 8' to 30' Pumped Poured
Type: # Monterey sand

Bentonite Chips: Yes No to _____ Pumped Poured

Date started: 1-15, 20 08
Date completed: 1-20, 20 08

7. Water Level
Static water level: 13.5 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: 75 °F
Quality: FAIR

8. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input checked="" type="checkbox"/> Bailer <input checked="" type="checkbox"/> Pump <input type="checkbox"/> Air Lift			
pumped	.5	8.5'	72 hrs

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.
Name Layne Christensen Co. Contractor
Address 12030 E. Riggs rd Contractor
Chandler AZ. 85249
Nevada contractor's license number 0019101
issued by the State Contractor's Board
Nevada driller's license number issued by the M-2226
Division of Water Resources, the on-site driller
Signed [Signature] By driller performing actual drilling on site or contractor
Date 1-28-08

DCNR/DWR
RECEIVED

FEB 01 2008

LAS VEGAS OFFICE

USE ADDITIONAL SHEETS IF NECESSARY

(Rev 05-06)