

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

OFFICE USE ONLY
Log No. 108691
Permit No. _____
Basin 222

PRINT OR TYPE ONLY

DO NOT WRITE ON BACK

City of Mesquite

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

NOTICE OF INTENT NO. 32262

1. OWNER Subdivision Common Area
MAILING ADDRESS 10 E Mesquite Blvd
Mesquite NV 89027

ADDRESS AT WELL LOCATION planter area on 2nd S between
OZ-16 pheasant dr & partridge ln
Subdivision Name: _____ County: clark

2. LOCATION SW 1/4 SE 1/4 Sec 17 T 13 N S R 71 E
PERMIT/WAIVER No. 001-17-897-003
Issued by Water Resources Parcel No. _____

Latitude 36.80030 UTM E NAD 27
Longitude 114.08061 N NAD 83/WGS 84

3. **WORKED PERFORMED**
 New Well Replace Recondition
 Deepen Other

4. **PROPOSED USE**
 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
top soil		0	2"	####
Sand & gravel fill		2"	2	####
brown Sand & clay		2	14	12
tan brown fine sand		14	26	12

AUG 14 2009

9. WELL CONSTRUCTION

Depth Drilled 26 Feet Depth Cased 26 Feet

HOLE DIAMETER (BIT SIZE)

From	To	Feet	Feet
<u>8</u> Inches	<u>0</u> Feet	<u>26</u> Feet	<u>26</u> Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>3/4</u>	<u>.2</u>	<u>.125</u>	<u>0</u>	<u>24</u>
<u>2.225</u>	<u>.64</u>	<u>.125</u>	<u>24</u>	<u>26</u>

Perforations:

Type of perforation factory slotted

Size of perforation micropore

From <u>25</u>	feet to <u>26</u>	feet
From _____	feet to _____	feet
From _____	feet to _____	feet
From _____	feet to _____	feet
From _____	feet to _____	feet

Annular Seal: Yes No

<input type="checkbox"/> Neat Cement	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Cement Grout	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input checked="" type="checkbox"/> 230% Bentonite Grout	<u>0</u> to <u>19</u>	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured

Gravel Pack: Yes No 23 to 26 Pumped Poured
Type: # 3 Silica

Bentonite Chips: Yes No 19 to 23 Pumped Poured
Type: 1/4 pellets

Date started: 11-Jul _____, 20 _____, 09
Date completed: 11-Jul _____, 20 _____, 09

7. **Water Level**
Static water level: 15 feet below land surface
Artesian Flow: n/a G.P.M. n/a P.S.I.
Water Temperature: n/a °F
Quality: good

8. WELL TEST DATA

TEST METHOD: Bailer Pump 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 WDC Exploration & wells
Contractor

Address 570 corinthian way
Contractor

N Las Vegas 89030

Nevada contractor's license number
issued by the State Contractor's Board 0012852

Nevada driller's license number issued by the
Division of Water Resources the on-site driller M-2371

Signed [Signature]
By driller performing actual drilling on site or contractor

Date 7-30-09

(Rev. 05-06)

USE ADDITIONAL SHEETS IF NECESSARY