

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

OFFICE USE ONLY
Log No. 115850
Permit No. _____
Basin 220

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. 35624

1. OWNER Clark County (Floyd Chene) ADDRESS AT WELL LOCATION None
MAILING ADDRESS 500 S. Grand Central Pkwy
Las Vegas NV. 89101 Subdivision Name: _____ County: Clark

2. LOCATION NE 1/4 Sec 12 T 16 N R 67 E Latitude 36° 33' 16.77" UTM E NAD 27
PERMIT/WAIVER No. MO-2905 | 010-12-796-006 Longitude -114° 26' 33.454" 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 Municipal/Industrial Stock
5. WELL TYPE Cable Rotary RVC Other Auger

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>SILTY SAND</u>	<u>wet</u>	<u>0</u>	<u>9</u>	<u>9</u>
<u>SILTY CLAY</u>	<u>wet</u>	<u>9</u>	<u>14</u>	<u>5</u>
<u>SANDY SILT</u>	<u>wet</u>	<u>14</u>	<u>20</u>	<u>6</u>
		<u>20</u>	<u>25</u>	<u>5</u>

DCNR/DWR RECEIVED
JUL 19 2012
LAS VEGAS OFFICE

9. WELL CONSTRUCTION

Depth Drilled 25 Feet Depth Cased 25 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
<u>8</u> Inches	<u>0</u> Feet	<u>2.5</u> Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2"</u>	<u>SCH 40 PVC</u>	<u>F-480</u>	<u>0</u>	<u>25</u>

Perforations:
Type of perforation Factory Slots
Size of perforation 0.20
From 10 feet to 25 feet
From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement _____ to _____ Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout 0 to 6 Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: Yes No 8 to 25 Pumped Poured
Type: 8 Material Sand

Bentonite Chips: Yes No 16 to 8 Pumped Poured
Type: 3/8 Hole Plug

Date started: 6/22, 20 12
Date completed: 6/22, 20 12

7. Water Level
Static water level: 9 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)

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Elite Drilling Inc. Contractor
Address 4255 W. Post Rd Contractor
Las Vegas, NV. 89118
Nevada contractor's license number _____
issued by the State Contractor's Board 54931
Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-1944

Signed Thomas M. Beall By driller performing actual drilling on-site or contractor
Date 7/17/12