DCNR/DWR/SNBO
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STATE OF NEVADA
DIVISION OF WATER RESOURCES
# WELL DRILLER'S REPORT

OFFICE USE ONLY
Log No. 118492
Permit No.
Basin No. 212

**PRINT OR TYPE IN BLACK INK 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. 37677
WELL NAME (If applicable): EW-17

1. OWNER/CLIENT NAME: Wal-Mart Stores Inc %PPTY Tax Dept
MAILING ADDRESS: P.O. Box 8050 MS 0555
Bentonville, AR 72712-8055

DETAILED ADDRESS AT WELL LOCATION: 1400 S. Lamb Blvd
Sunrise Manor
Subdivision Name: County: Clark

2. PLS LOCATION: NW ¼ NW ¼ 5 Sec. 21S N/S 62 E
PERMIT/WAIVER NO. _____ (Issued by Water Resources) 161-05-114-003 (Current Parcel No.)

Latitude 36 09'22.29"N UTM E _____ ☐ NAD 27
Longitude 115 04'45.06"W UTM N _____ ☒ NAD 83/WGS 84

3. WORKED PERFORMED
☒ New Well ☐ Deepen: Orig WL# _____
☐ Replacement: Original well log # _____
☐ Recondition: Original well log # _____

4. PROPOSED USE
☐ Domestic ☐ Irrigation ☒ Monitor
☐ Mining / Dewater ☐ Com / Ind ☐ Stock
☐ Test / Other ☐ Mun / QM ☐ Rec

5. WELL TYPE
☒ Auger ☐ Rotary ☐ RVC
☐ Air ☐ Mud ☐ Sonic
☐ Other

6. LITHOLOGIC LOG

| Material Encountered | Lost Circ. | Water Strata | From | To | Thickness |
|---|---|---|---|---|---|
| Fill | | | 0 | 2 | 2 |
| Silty Clay | | | 2 | 15 | 13 |
| Clayey Sand | | | 15 | 30 | 15 |
| Sandy Clay | | | 30 | 45 | 15 |
| Clayey Sand | | | 45 | 50 | 5 |

Date started: 8-Aug, 20 13
Date completed: 8-Aug, 20 13

7. WATER QUALITIES
Static water level: 17.62 Feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ ° Fahrenheit
Water Quality: _____

8. WELL TEST DATA
Test Method: ☐ Bailer ☐ Pump ☐ Air Lift

| G.P.M. | Draw Down (Feet Below Static) | Recorded Time (Hours) |
|---|---|---|
| | | |

9. WELL CONSTRUCTION
Depth Drilled: 50 Feet Depth Cased: 50 Feet

HOLE DIAMETER (BIT SIZE)

| | | From | | To | |
|---|---|---|---|---|---|
| 10 | Inches | 0 | Feet | 50 | Feet |
| | Inches | | Feet | | Feet |
| | Inches | | Feet | | Feet |

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|---|---|---|---|---|
| 4.5 | | Sch 40 | 0 | 50 |
| 1.050 | | Sch 40 | 0 | 50 |

PERFORATIONS:
Type of perforation: Factory Slotted
Size of perforation: 0.02
From 15 Feet To 50 Feet
From _____ Feet To _____ Feet
From _____ Feet To _____ Feet

ANNULAR MATERIALS

| | | | | |
|---|---|---|---|---|
| ☐ Sanitary Seal | | to | | |
| ☐ Neat Cement | | to | ☐ Pumped | ☐ Poured |
| ☒ Cement Grout | 1 | to 11 | ☐ Pumped | ☒ Poured |
| ☐ Concrete Grout | | to | ☐ Pumped | ☐ Poured |
| ☒ Bentonite Chips | 11 | to 13 | ☐ Pumped | ☒ Poured |
| ☐ Bentonite Grout | | to | ☐ Pumped | ☐ Poured |
| ☐ 15 % ☐ 20 % ☐ Other, explain: | | | | |
| ☒ Gravel Pack [ > 0.2 in. ] | 13 | to 50 | ☐ Pumped | ☒ Poured |
| ☐ Sand Pack [ < 0.2 in. ] | | to | ☐ Pumped | ☐ Poured |
| ☐ Other, explain: | | to | ☐ Pumped | ☐ Poured |

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.
Name: Cascade Drilling L.P. (Contractor)
Address: 4590 Copper Sage St., Las Vegas, NV 89115 (Contractor)
Nevada contractor's license number as issued by the State Contractor's Board: C23-0073966
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller): 2381
Signed: _____ (By driller performing actual drilling on site or contractor)
Date: 9.6.13

(Rev. 08-12)

**USE ADDITIONAL SHEETS IF NECESSARY**

36.1562196 NAD 27
-115.0783511