

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

OFFICE USE ONLY
Log No. 121179
Permit No. _____
Basin No. _____

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 37183

1. OWNER/CLIENT NAME AA Bay - Bridge Constructors DETAILED ADDRESS AT WELL LOCATION 2151 N. Rancho Dr.
MAILING ADDRESS 928 Visconti Place LAS VEGAS NV
LAS VEGAS NV 89138 Subdivision Name _____ County: CLARK
2. PLS LOCATION NE 1/4 NW 1/4 19 Sec 20 NB 61 E Latitude 36 11' 59.23" N UTM E _____
PERMIT/WAIVER NO. 139-14-103-662 Longitude 115 11' 47.72" W UTM N _____
Issued by Water Resources Current P. _____ of No. _____

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
Fill			0	4
SILTY SAND			4	5
SANDY CLAY			5	9
CLAY			9	12
SANDY CLAY w/ GRAVEL			12	15
SILTY CLAY w/ GRAVEL			15	20
SANDY CLAY		26	20	26
SANDY CLAY w/ GRAVEL			26	31
SANDY CLAY			31	36

9. INSTRUCTION
Depth Drilled: 36 Feet Depth Cased: 36 Feet
HOLE DIAMETER (BIT SIZE)
From 0 To 36
Inches _____ Feet _____
Inches _____ Feet _____
Inches _____ Feet _____

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4.5</u>	<u>2.01</u>	<u>0.237</u>	<u>0</u>	<u>16</u>

ANNULAR MATERIALS

Sanitary Seal Yes No

Neat Cement _____ to _____

Cement Grout 2 to 12 Pumped Poured

Concrete Grout _____ to _____ Pumped Poured

Bentonite Chips 12 to 14 Pumped Poured

Gravel Pack (> 0.2 in.) _____ to _____ Pumped Poured

Sand Pack (< 0.2 in.) 14 to 36 Pumped Poured

Other, explain: _____

PERFORATIONS:

Type of perforation: FALTY

Size of perforation: 0.20

From 16 Feet To 36 Feet

From _____ Feet To _____ Feet

From _____ Feet To _____ Feet

From _____ Feet To _____ Feet

Date started: 9-11-2014
Date completed: 9-11-2014

7. WATER QUALITIES
Static water level: 23 Feet below land surface
Artesian Flow: _____ G.P.M. P.S.I.
Water Temperature: N/A ° Fahrenheit
Water Quality: CLEAR

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.
Name: NATIONAL EWP Contractor
Address: 5241 Scholls St. LAS VEGAS NV 89118 Contractor

8. WELL TEST DATA

Test Method:	G.P.M.	Draw Down (Feet Below Static)	Recorded Time (Hours)
<input checked="" type="checkbox"/> Bailor <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			

Nevada contractor's license number as issued by the State Contractor's Board: 0075355
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller): 2492
Signed: Rick Johnson
Date: 9-15-14