

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

OFFICE USE ONLY  
Log No. **121439**  
Permit No. \_\_\_\_\_  
Basin \_\_\_\_\_

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. **36840**

1. OWNER **Public Right of way Clark County** ADDRESS AT WELL LOCATION **No Address**  
MAILING ADDRESS **500 S. Grand Central pkwy. Las Vegas, NV 89155-0000** **Highland Drive + Zona**  
Subdivision Name: \_\_\_\_\_ County: **Clark**  
2. LOCATION **NE 1/4 SE 1/4 Sec 8 T 21 N R 61 E** Latitude **36°08'09.21" N** UTM E  NAD 27  
PERMIT/WAIVER No. **162-08-799-007** Longitude **115°10'26.33" W** 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  
 Air  Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Asphalt		0	0.5	0.5
Type II		0.5	2	1.5
Sand Gravel w/clay w/gypsum		2	12.5	9.5
caliche gravel w/sand w/layers of caliche		12.5	23	
sandy clay		23	30	

9. WELL CONSTRUCTION

Depth Drilled **30** Feet Depth Cased **30** Feet

HOLE DIAMETER (BIT SIZE)

From	To	Feet	Feet
6" inches	0	30	

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2"	Sch 40	Sch 40	0	30

Perforations: Type of perforation **Factory slot**  
Size of perforation **020**

From	feet to	feet	feet
5	30		

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	0 to 1	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
<input type="checkbox"/> ≥30% Bentonite Grout	to	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

Gravel Pack:  Yes  No **3** to **30**  Pumped  Poured  
Type: **#12**

Bentonite Chips:  Yes  No **1** to **3**  Pumped  Poured  
Type: **hole plug**

Date started: **4-8** 20 **14**  
Date completed: **9-8** 20 **14**

7. Water Level  
Static water level: **19** feet below land surface  
Artesian Flow: \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water Temperature: \_\_\_\_\_ °F  
Quality: \_\_\_\_\_

8. WELL TEST DATA

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

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.**  
Address **4255 W. Post rd Las Vegas, NV 89118**  
Nevada contractor's license number **054931**  
issued by the State Contractor's Board  
Nevada driller's license number issued by the Division of Water Resources, the on-site driller **M-1869**

Signed **[Signature]**  
By driller performing actual drilling on-site or contractor  
Date **9-10-14**