

WELL ID.
MW 01

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

OFFICE USE ONLY
Log No. 122262
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. 37451

1. OWNER Nevada Env. Response Trust
MAILING ADDRESS 35 E. Wacker DR. 1550
Chicago Ill 60601

ADDRESS AT WELL LOCATION 501 S. 4th Street Henderson
Nevada
Subdivision Name: Black Mt. Ind. Complex County: Clark County

2. LOCATION NW 1/4 SE 1/4 Sec 12 T. 22 N. R. 62 E
PERMIT/WAIVER No. MO-3034 178-12-781-004
Issued by Water Resources Parcel No. _____

Latitude 36.0468025° N UTM E NAD 27
Longitude -115.0028190° W 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 Hollowstem Auger

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Silty gravel, rocks		0'	5'	5'
Silty gravel, sand		5'	10'	5'
Silty sand		10'	15'	5'
Silty sand, little gravel		15'	20'	5'
Sandy silts, gravel		20'	25'	5'
Wet gravel	X	25'	30'	5'
Silty clays	X	30'	32'	2'

9. WELL CONSTRUCTION

Depth Drilled 32' Feet Depth Cased 32' Feet

HOLE DIAMETER (BIT SIZE)

From	To
<u>8</u> Inches	<u>0'</u> Feet <u>32'</u> Feet
_____ Inches	_____ Feet _____ Feet
_____ Inches	_____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2</u>		<u>SCH 40</u>	<u>0'</u>	<u>32'</u>

Perforations:

Type of perforation Slotted
Size of perforation .020

From 32' feet to 22' feet
From _____ feet to _____ feet

Annular Seal: Yes No

<input type="checkbox"/> Neat Cement	to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input checked="" type="checkbox"/> Cement Grout	<u>18'</u> to <u>3'</u>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
<input type="checkbox"/> Concrete Grout	to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<input type="checkbox"/> ≥30% Bentonite Grout	to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

Gravel Pack: Yes No 32' to 21' Pumped Poured
Type: 2/12 sand

Bentonite Chips: Yes No 21' to 18' Pumped Poured
Type: medium bentonite chips

Date started: March 20, 20 15
Date completed: March 20, 20 15

7. Water Level
Static water level: 24 feet below land surface
Artesian Flow: N/A G.P.M. N/A P.S.I.
Water Temperature: N/A °F
Quality: N/A

8. WELL TEST DATA

TEST METHOD: Bailor 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 Cristobal Contractor
Address Green Drilling, 2726 W. 1st Ave. Small Hillch
90755

Nevada contractor's license number issued by the State Contractor's Board 0038113
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2435-M

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

Date 3.26.15

(Rev. 05-06)

USE ADDITIONAL SHEETS IF NECESSARY

36.0468264 NAD 27
-115.0019923 (O) 627