

WELL ID
M1W07

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

OFFICE USE ONLY
Log No. 122268
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 Newman Environmental Trust ADDRESS AT WELL LOCATION S. S. Fourth St Henderson Nevada
MAILING ADDRESS 35 E Wacker Dr 1850 Chicago IL 60601 Subdivision Name Blackint industrial complex County: Clark

2. LOCATION N 1/4 SE 1/4 Sec 12 T 22 N R 62 E Latitude 36° 04' 30.541" N UTM E NAD 27
PERMIT/WAIVER No. MO-3034 178-12-701-004 Longitude -115° 00' 21.822" 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
 Municipal/Industrial Monitor Stock

5. WELL TYPE
 Cable Rotary RVC
 Other full water meter

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
gravelly sand mixture		0	5	5
sand rakes		5	10	5
sandy gravel		10	15	5
coarse sand		15	20	5
sand		20	25	5
silt sand, moist	X	25	30	5
silt clay		30	32	2

9. WELL CONSTRUCTION

Depth Drilled 32 Feet Depth Cased 32 Feet

HOLE DIAMETER (BIT SIZE)

From	To
8 inches	0 feet 32 feet
inches	feet feet
inches	feet feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2		sch 40	0	32

Perforations:

Type of perforation slotted

Size of perforation .020

From 32 feet to 22 feet

From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement to _____ Pumped Poured

Cement Grout 18 to 3 Pumped Poured

Concrete Grout to _____ Pumped Poured

≥30% Bentonite Grout to _____ Pumped Poured

Gravel Pack: Yes No 32 to 21 Pumped Poured

Type: 1/2 sand

Bentonite Chips: Yes No 21 to 18 Pumped Poured

Type: medium bentonite ch. ps

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: 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 Luis Torres Contractor

Address 2726 W. Lorraine Small Hill ca 90755 Contractor

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 _____
By driller performing actual drilling on-site or contractor

Date 3-26-15