

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

OFFICE USE ONLY
Log No. 123496
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. 38046
WELL NAME (if applicable): well#35

1. OWNER/CLIENT NAME Clark County - Public Right of Way
MAILING ADDRESS 500 South Grand Central PKWY 2nd floor Las Vegas NV 84155

DETAILED ADDRESS AT WELL LOCATION McLeod Dr. between East Sunset Rd. and East Post Rd, Clark County NV
Subdivision Name _____ County Clark

2. PLS LOCATION SE 1/4 SW 1/4 36 Sec 21S N1S 61 E
PERMIT/WAIVER NO. DW-1377 162-36-499-001
Issued by Water Resources Current Parcel No.

Latitude 36 04' 27.21" N UTM E NAD 27
Longitude 115. 06' 42.96" 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 / De-water 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
packed silt- calicchi			0	3
calicchi - silty clay			3	4
silty clay - soft silty clay			4	14
soft silty clay - silty clay			14	17
silty clay- silty sand clay			17	18
silty sand clay- hard clay			18	24
hard clay			24	40
Note - Annular Material				
Gravel pack			0	10

Date started 28-Aug , 20 15
Date completed 28-Aug , 20 15

7. WATER QUALITIES
Static water level: 14 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)			

(Rev. 12-13)

9. INSTRUCTION
Depth Drilled: 40 Feet Depth Cased: 40 Feet
HOLE DIAMETER (BIT SIZE)
From 24 Inches To 0 Feet 40 Feet
Inches Feet Feet
Inches Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8	6	3/8	0	40

ANNULAR MATERIALS
Sanitary Seal Yes No
 Neat Cement _____ to _____ Pumped Poured
 Cement Grout _____ to _____ Pumped Poured
 Concrete Grout _____ to _____ Pumped Poured
Bentonite Chips 10 to 12 Pumped Poured
 Gravel Pack [> 0.2 in.] 12 to 40 Pumped Poured
 Sand Pack [< 0.2 in.] _____ to _____ Pumped Poured
 Other, explain: _____ to _____ Pumped Poured

PERFORATIONS
Type of perforation: machine slot
Size of perforation: 0.032
From 20 Feet To 40 Feet
From _____ Feet To _____ Feet
From _____ Feet To _____ Feet
From _____ Feet To _____ Feet

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.
Name Viking Drillers, Inc
Address 5950 Granite Lake Drive, Granite Bay, CA 95746
Nevada contractor's license number as issued by the State Contractor's Board: 0034680
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site title): 2361
Signed: Matthew Rose
Date: 9/29/15

USE ADDITIONAL SHEETS IF NECESSARY

pg. _____ of pg. _____

36.0742515
-115.1111033
NAD
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