

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

OFFICE USE ONLY
Log No. 123553
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 38051
WELL NAME (if applicable): well#71

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. just south of East Patrick Lane, Clark County NV
Subdivision Name _____ County _____

2. PLS LOCATION NW 1/4 SE 1/4 36 Sec 21S N/S 61 E
PERMIT/WAIVER NO DW-1379 162-36-799-009
Issued by Water Resources Current Parcel No.

Latitude 36 04' 41.64" N UTM E NAD 27
Longitude 115. 06'35.11" 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 Dewater Com / Ind Stock Mun / QM Test / Other Rec

5. WELL TYPE
 Auger Rotary RVC Air Mud Sonic Other _____

6. LITHOLOGIC LOG

Material Encountered	Lost Circ	Water Strata	From	To
dry silty little touch clay			0	1
silty little touch clay-rock&clay			1	10
rock&clay - silty clay			10	12
silty clay - hard pan			12	22
hard pan - silty clay			22	23
silty clay - calichi			23	35
calichi - hard silty clay			35	36
hard silty clay			36	50
Note - Annular Material				
Gravel pack			0	10

9. INSTRUCTION

Depth Drilled: 50 Feet Depth Cased: 50 Feet

HOLE DIAMETER (BIT SIZE)

From	To
<u>24</u> Inches	<u>0</u> Feet <u>50</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>8</u>	<u>6</u>	<u>3/8</u>	<u>0</u>	<u>50</u>
_____	_____	_____	_____	_____

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 50 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 50 Feet

From _____ Feet To _____ Feet

Date started 17-Aug , 20 15
Date completed: 17-Aug , 20 15

7. WATER QUALITIES
Static water level: 21 Feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ ° Fahrenheit
Water Quality: _____

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

8. WELL TEST DATA

Test Method:	G.P.M.	Draw Down (Feet Below Static)	Recorded Time (Hours)
<input 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 0034680
Nevada well driller's license number as issued by the Nevada Division of Water Resource (on-site driller) 2361
Signed: Matthew J. Ray
Date: 8/29/15
By driller performing actual drilling on site contractor

36-0782599
-115.1089227
NAD
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