

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

OFFICE USE ONLY
Log No. 123788
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#24

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 N/S 61 E
PERMIT/WAIVER NO. DW-1377 162-36-499-001
Issued by Water Resources Current Parcel No.

Latitude 36 04' 22.51" N UTM E NAD 27
Longitude 115. 06' 45.84" 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
 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
silt- calicchi			0	6
calicchi - silty clay			6	9
silty clay-silty clay			9	20
silty clay- hard clay			20	28
hard clay -bio silty clay layer			28	35
bio silty clay layer			35	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		
<input checked="" type="checkbox"/> Neat Cement		<input type="checkbox"/> No	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			to _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
Bentonite Chips	<u>10</u>		to <u>12</u>	<input type="checkbox"/> Pumped <input checked="" type="checkbox"/> Poured
<input checked="" type="checkbox"/> Gravel Pack [> 0.2 in.]	<u>12</u>		to <u>50</u>	<input type="checkbox"/> Pumped <input checked="" type="checkbox"/> Poured
<input type="checkbox"/> Sand Pack [< 0.2 in.]			to _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
<input type="checkbox"/> Other, explain:			to _____	<input type="checkbox"/> Pumped <input type="checkbox"/> Poured

Date started: 16-Sep, 20 15
Date completed: 16-Sep, 20 15

PERFORATIONS:

Type of perforation: machine slot
Size of perforation: 0.032

From	To	From	To
<u>20</u> Feet	<u>50</u> Feet	_____ Feet	_____ Feet
_____ Feet	_____ Feet	_____ Feet	_____ Feet
_____ Feet	_____ Feet	_____ Feet	_____ Feet

7. WATER QUALITIES
Static water level: 18 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 Contractor
Address 5950 Granite Lake Drive, Granite Bay, CA 95746 Contractor

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 Resources (on-site driller): 2361
Signed: Matthew J. Pene
Date: 9/29/15
By driller performing actual drilling on site or contractor

36.072946 NAD
-115.1119034 27