

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

OFFICE USE ONLY
Log No. 124342
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. 38077
WELL NAME (if applicable): well#145

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 Hacienda Ave. just east of Lamb Ave., Clark County, Las Vegas NV.
Subdivision Name: _____ County: _____

2. PLS LOCATION NW 1/4 SW 1/4 29 Sec 21 N/S 62 E Latitude 36.092885°N UTM E _____ NAD 27
PERMIT/WAIVER NO. DW-1400 161-29-399-001 Longitude 115.082044°W UTM N _____ NAD 83/WGS 84
Issued by Water Resources Current Parcel No.

3. WORKED PERFORMED
 New Well Deepen: Orig WL# _____
 Replacement: Original well log # _____
 Recondition: Original well log # _____

4. PROPOSED USE
 Domestic Irrigation Monitor Stock Rec
 Mining / Dewater Com / Ind Mun / QM
 Test / Other

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

6. LITHOLOGIC LOG

Material Encountered	Lost Circ.	Water Strata	From	To
packed silt-silty clay			0	4
packed dry clay			4	12
silty clay			12	17
packed dry clay			17	26
silty clay			26	40

9. INSTRUCTION
Depth Drilled: 40 Feet Depth Cased: 40 Feet

HOLE DIAMETER (BIT SIZE)

From	To
24 Inches	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

OK'D/DWR/NEC
RECEIVED
DEC 8 1 2015

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.] 0 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	Feet	To	Feet
20		40	

Date started: 26-Sep 20 15
Date completed: 26-Sep 20 15

7. WATER QUALITIES

Static water level: 17 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

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. Perry
By signing, I certify that I am the actual driller on site or contractor

Date: 12/28/15

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			

36.0929114 NAD
-115.081214 29