

OFFICE USE ONLY
Log No. 27982
Permit No. 47684
Basin 212

NOTICE OF INTENT NO. 4287

WELL DRILLERS REPORT

Please complete this form in its entirety

PRINT OR TYPE ONLY

1 in book

OWNER Bruce W. Vomocck ADDRESS AT WELL LOCATION _____
MAILING ADDRESS _____

2. LOCATION NE 1/4 SE 1/4 Sec 33 T 19 N/S R. 60 E Clark County
PERMIT NO. 47684 Issued by Water Resources Parcel No. _____ Subdivision Name _____

3. TYPE OF WORK
New Well Recondition
Deepen Other

4. PROPOSED USE
Domestic Irrigation Test
Municipal Industrial Stock

5. TYPE WELL
Cable Rotary
Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Sand - clay</u>		<u>0</u>	<u>16</u>	<u>16</u>
<u>CLAY</u>		<u>16</u>	<u>45</u>	<u>29</u>
<u>Br. lime</u>		<u>40</u>	<u>43</u>	<u>3</u>
<u>Caliche</u>		<u>43</u>	<u>98</u>	<u>55</u>
<u>Br. lime</u>		<u>98</u>	<u>101</u>	<u>3</u>
<u>Clay</u>		<u>101</u>	<u>360</u>	<u>159</u>
<u>Gravel w/ silt</u>				
<u>of clay</u>		<u>360</u>	<u>520</u>	<u>140</u>

8. WELL CONSTRUCTION
Diameter hole 12 1/4 inches Total depth 520 feet
Casing record 0-520
Weight per foot _____ Thickness 155
Diameter _____ From _____ To _____
5 3/8 inches _____ feet _____ feet
_____ inches _____ feet _____ feet
Surface seal: Yes No Type cast
Depth of seal _____ feet
Gravel packed: Yes No
Gravel packed from 520 feet to 520 feet

Perforations:
Type perforation Rotary
Size perforation _____
From _____ feet to _____ feet
From _____ feet to _____ feet

9. WATER LEVEL
Static water level 138 feet below land surface
Flow _____ G.P.M. _____ P.S.I.
Water temperature _____ ° F. Quality _____

10. DRILLERS CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name L. R. Thomas Contractor
Address 5965 N. VOMOCK Contractor
Nevada contractor's license number 10831
Nevada contractor's drillers number 623
Nevada driller's license number 623 Actual Driller
Signed L. R. Thomas Contractor
Date 9-22-56

Date started 8-11- 1956
Date completed 8-19- 1956

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump

BAILER TEST
G.P.M. _____ Draw down _____ feet _____ hours
G.P.M. _____ Draw down _____ feet _____ hours
G.P.M. _____ Draw down _____ feet _____ hours

RECEIVED

OCT 8 1956

Div. of Water Resources
Branch Office - Las Vegas, NV