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WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.940

NOTICE OF INTENT NO. 5233
Patrick & Mann

1. OWNER Lenn Shearer/Millard Cyester ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 4200 W. Spring Mtn. Rd.
Las Vegas, Nev. 89103

2. LOCATION SW $\frac{1}{4}$ NE $\frac{1}{4}$ Sec. 35 T. 21 N. 60 E. Clark County
 PERMIT NO. 55470 Issued by Water Resources Parcel No. _____ Subdivision Name _____

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other _____

4. PROPOSED USE
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock

5. WELL TYPE
 Cable Rotary RVC
 Air Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
silt, gravel		0	2	2
calchi		2	4	2
cemented silt, sand		4	12	8
cemented sand & gravel		12	20	8
sand & gravel congl.		20	37	17
partially cemented sand & gravel		37	110	73
cemented sand & gravel		110	118	8
sand & gravel		118	128	10
cemented sand & gravel		128	165	37
sand & gravel		165	206	41
partially cemented sand & gravel		206	340	134
sand & gravel	*	340	423	83
partially cemented sand & gravel		423	460	37

8. WELL CONSTRUCTION
 Depth Drilled 460 Feet Depth Cased 460 Feet

HOLE DIAMETER (BIT SIZE)
 From _____ To _____
20 Inches 0 Feet 460 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6 5/8"	12.92	.188	+1	460

Perforations:
 Type perforation Torch
 Size perforation 1/16 x 6 x 4 around

From 360 feet to 460 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 50 _____
 Neat Cement
 Placement Method: Pumped Concrete Grout
 Poured

Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 350 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 10-12, 19 91
 Date completed 10-15, 19 91

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
40	?	2

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Allen Drilling, Inc. Contractor
 Address 4847 So. Valley View Blvd. Contractor
Las Vegas, Nev. 89103

Nevada contractor's license number issued by the State Contractor's Board 0018916-0018917
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1661

Signed Donald Wall
 By driller performing actual drilling on site or contractor

Date _____

