

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

OFFICE USE ONLY
 Log No. 36967
 Permit No. _____
 Basin 212

PRINT OR TYPE 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. 9633

1. OWNER R.C. WHITE Transportation Center ADDRESS AT WELL LOCATION 4499 S. Arville St.
 MAILING ADDRESS CLARK COUNTY School District Las Vegas NV.
4499 S. Arville St.
 2. LOCATION SE 1/4 NW 1/4 Sec 19 T 21 N 61 E County CLARK
 PERMIT NO. MD-2147

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 MD-2

Material	Water Strata	From	To	Thickness
<u>3" Asphaltic concrete</u>				
<u>Brown silty sand</u>		<u>0</u>	<u>5</u>	<u>5</u>
<u>CALICHE</u>		<u>5</u>	<u>7.5</u>	<u>2.5</u>
<u>SANDY SILT</u>		<u>7.5</u>	<u>13</u>	<u>5.5</u>
<u>SILTY SAND</u>		<u>13</u>	<u>23</u>	<u>10</u>
<u>CLAYEY SAND w/gel</u>		<u>23</u>	<u>30.5</u>	<u>7.5</u>
<u>CALICHE</u>		<u>30.5</u>	<u>32.5</u>	<u>2</u>
<u>SANDY CLAY</u>		<u>32.5</u>	<u>36.5</u>	<u>4</u>
<u>CLAYEY SAND</u>		<u>36.5</u>	<u>40</u>	<u>3.5</u>
<u>total depth 40'</u>				

8. WELL CONSTRUCTION
 Depth Drilled 40 Feet Depth Cased 40 Feet
 HOLE DIAMETER (BIT SIZE)
 From 10 Inches To 40 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4 INCH</u>		<u>5CH 40 PVC</u>	<u>0</u>	<u>40</u>

Perforations:
 Type perforation MACHINE SLOTTED
 Size perforation 0.020 INCH
 From 10 feet to 40 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 8 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 8 feet to 40 feet

RECEIVED

MAY 04 1992

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

Date started 4-28, 1992
 Date completed 4-28, 1992

7. WELL TEST DATA

TEST METHOD:	TEST METHOD: <input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift		
	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

9. WATER LEVEL
 Static water level 27 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name DON WILSON
 Address 4670 S. POLARIS AVE
LAS VEGAS NV.
 Nevada contractor's license number issued by the State Contractor's Board _____
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller _____
 Signed Don Wilson
 By driller performing actual drilling on site or contractor
 Date _____