

OFFICE USE ONLY
 Log No. **37081**
 Permit No. **212**
 Basin **212**

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. **9651**

1. OWNER **ANDERSON DAIRY** ADDRESS AT WELL LOCATION **ANDERSON DAIRY**
 MAILING ADDRESS **C/O Broadbent & Assoc. 801 SEARLES AVE**
833 NEVADA HWY, BOULDER CITY LAS VEGAS, NEVADA
 2. LOCATION $\frac{1}{4}$ NW $\frac{1}{4}$ Sec **26** T **26** N **61** E **CLARK** County
 PERMIT NO. **M02152** 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 **AUGER**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Silty Sand w/gravel & cobbles		0	9	9
Sandy silt w/gravel		9	10	1
Caliche w/some gravel		11	17	6
Silty Sand w/o gravel		17	25	8
Addition of clay @ 20'				
T.D = 25'				

8. WELL CONSTRUCTION
 Depth Drilled **25** Feet Depth Cased **25** Feet
 HOLE DIAMETER (BIT SIZE)
 From **8** Inches To **25** Feet
 Inches Feet Feet Feet
 Inches Feet Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2"	.7lbs	Sch. 40	0	25

Perforations:
 Type perforation **Factory spotted**
 Size perforation **0.020**
 From **10** feet to **25** feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal **0.7/Best. 5.7** Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No **w/Best.**
 From **7** feet to **25** feet

9. WATER LEVEL
 Static water level **14.5** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started **5.5** 19 **92**
 Date completed **5.5** 19 **92**

7. WELL TEST DATA

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)	

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name **RICHARD LEDJANC** Contractor
 Address **4670 S. TOULARIS AVE**
LAS VEGAS, NEVADA 89103
 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 **M1817**
 Signed **R. Ledjanc**
 By driller performing actual drilling on site or contractor
 Date **5.11.92**

RECEIVED

JUN 2 1992

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