WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

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

OFFICE USE ONLY
Log No. 37691
Permit No. 54995
Basin 212

NOTICE OF INTENT NO. 11180

1. OWNER JERRY ROBINSON
MAILING ADDRESS
ADDRESS AT WELL LOCATION

2. LOCATION SW ¼ SE ¼ Sec. 29 T. 19 N/S R. 60 E. CLARK County
PERMIT NO. 54995 (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	Thickness
SAND - Clay - ROCKS		0	98	98
CMT GRAVEL		98	119	21
Clay		119	151	32
CMT GRAVEL W/				
STREAK OF Clay		151	455	304

8. WELL CONSTRUCTION
Depth Drilled 455 Feet Depth Cased 455 Feet

HOLE DIAMETER (BIT SIZE)

		From	To
12¼ Inches		0 Feet	455 Feet
Inches		Feet	Feet
Inches		Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8⅝	16.9	.188	0	455

Perforations:
Type perforation FACTORY
Size perforation ¼ X 3
From 415 feet to 455 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

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

Gravel Packed: ☑ Yes ☐ No
From 50 feet to 455 feet

9. WATER LEVEL
Static water level 175 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 LEE R. THOMAS (Contractor)
Address 5965 N. MAVERICK (Contractor)
L.V. NEV.
Nevada contractor's license number issued by the State Contractor's Board 10831
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1594
Signed (By driller performing actual drilling on site or contractor)
Date 4-17-92

Date started 4-9- 19 92
Date completed 4-10- 19 92

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

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

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(Rev. 3-91) USE ADDITIONAL SHEETS IF NECESSARY (D)-627