

OFFICE USE ONLY  
 Log No. 41451  
 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. 11972

1. OWNER Western Summit ADDRESS AT WELL LOCATION 200 ATHERS BL Henderson  
 MAILING ADDRESS 5470 Valley Highway Denver CO.  
 2. LOCATION S15 1/4 36 T 21 N(S) R. 62 E CLARK County  
 PERMIT NO. DW 1007 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 Bucket

6. HEAD WORKS LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>SANDY W/ROCKS</u>		<u>0</u>	<u>8</u>	<u>8</u>
<u>GRAVEL &amp; SAND</u>		<u>8</u>	<u>20</u>	<u>12</u>
<u>GRAVEL W/CLAY</u>		<u>20</u>	<u>30</u>	<u>10</u>
<u>GREEN CLAY &amp; ROCKS</u>		<u>30</u>	<u>35</u>	<u>5</u>
<u>WHITE CLAY</u>		<u>35</u>	<u>40</u>	<u>5</u>

8. WELL CONSTRUCTION  
 Depth Drilled 40 Feet Depth Cased 40 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From 24 Inches To 40 Feet  
 Casing Schedule  

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>12</u>			<u>0</u>	<u>40</u>

 Perforations:  
 Type perforation SAN CUT  
 Size perforation .040  
 From 20 feet to 40 feet  
 Surface Seal:  Yes  No Seal Type:  
 Neat Cement  
 Cement Grout  
 Concrete Grout  
 Placement Method:  Pumped  Poured  
 Gravel Packed:  Yes  No  
 From 0 feet to 40 feet  
 9. WATER LEVEL  
 Static water level 15 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

RECEIVED  
 MAY 19 1993  
 Div. of Water Resources  
 Branch Office - Las Vegas, NV

Date started 2-2 1993  
 Date completed 2-2 1993

7. WELL TEST DATA

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

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name Foot Hills Eng Contractor  
 Address 905 E 3rd ST Contractor  
 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 1567  
 Signed Chuck W. Semel  
 By driller performing actual drilling on site or contractor  
 Date 2-2