

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

OFFICE USE ONLY  
 Log No. 41452  
 Permit No. \_\_\_\_\_  
 Basin 210

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. 11972

1. OWNER Western Summit ADDRESS AT WELL LOCATION 200 Athens Ave Henderson NV  
 MAILING ADDRESS 5470 Valley Highway Denver Co.  
 2. LOCATION SE 1/4 36 T 21 N 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. Headworks LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>SAND w/ ROCKS</u>		<u>0</u>	<u>8</u>	<u>8</u>
<u>SANDY GRAVEL</u>		<u>8</u>	<u>15</u>	<u>7</u>
<u>CEMENTED SAND</u>		<u>15</u>	<u>16</u>	<u>1</u>
<u>SANDY CLAY w/ GRAVEL</u>		<u>16</u>	<u>35</u>	<u>19</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" To 40"  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ 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 SAUCUT  
 Size perforation .040  
 From 20 feet to 40 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ 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

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

9. WATER LEVEL  
 Static water level 15 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started 2-3, 19\_\_\_\_  
 Date completed 2-3, 19\_\_\_\_

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 Foot Hills Eng Contractor  
 Address 905 E 3rd St Corona Cal. 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. Sewell  
 By driller performing actual drilling on site or contractor  
 Date 2-3

