

41555

WELL DRILLER'S REPORT

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.300

Log No. _____
Permit No. _____
Basin _____

NOTICE OF INTENT NO. 23716

1. OWNER CAL-NEW PIPELINE Co.

MAILING ADDRESS 96 CONVERSE CONSULTANTS

4670 S. POLARIS AV LN NV 89103

ADDRESS AT WELL LOCATION
5049 N. SLOAN LANE
N. LAS VEGAS, NV

CAL-NEW

2. LOCATION SW 1/4 NW 1/4 Sec 34 T 19 N OR 62 E CLARK

CLARK County

PERMIT NO. MO-2258

Parcel No. _____

Subdivision Name _____

3. WORK PERFORMED
 New Well
 Replace
 Abandon
 Deepen
 Recondition
 Other _____

4. Domestic
 Municipal/Industrial

PROPOSED USE
 Irrigation
 Monitor
 Stock

5. WELL TYPE
 Cable
 Rotary
 RVC
 Air
 Other AUGER

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
SILTY SAND		0	6	6
CLAYE GRAVEL		6	9	3
SANDY SILT		9	24	15
CLAYEY SILT		24	30	6
CLAYEY GRAVEL		30	31	1
CLAYEY SILT		31	35	4
SILTY CLAY		35	41	6
SILTY CLAY		41	66	25
CLAYEY GRAVEL		66	71	5
SILTY CLAY		71	82	11
CLAYEY SILT		82	84	2
SILTY CLAY		84	128	44

8. WELL CONSTRUCTION

Depth Drilled 128 Feet HOLE DIAMETER (BIT SIZE)
 From _____ To 128 Feet

Inches _____ Feet _____ Feet

Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2"	7 lbs	SC4	40	0
			0	128

Performations: FACTORY SLOTTED

Type perforation 0.020"

Size perforation 126 feet to 128 feet

From _____ feet to _____ feet

Surface Seal: Yes No Seal Type: Neat Cement

Depth of Seal 0-122/120-122 SENT. Cement Grout

Placement Method: Pumped Concrete Grout

Poured

Gravel Packed: Yes No

From 122 feet to 128 feet

9. WATER LEVEL

Static water level 95 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 RICHARD LEBLANC Contractor

Address 4670 S. POLARIS AV. Contractor

LAS VEGAS, NV 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 H-1817

Signed _____

By driller performing actual drilling on site or contractor

Date 6-18-93

Date started JUNE 2 1993

Date completed JUNE 2 1993

7. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

G.P.M. (Feet Below Static) _____ Time (Hours) _____