



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. 11565

1. OWNER N6WA ADDRESS AT WELL LOCATION Divina 9 Paradise
 MAILING ADDRESS 6375 Riverside Dr. Dublin OH 43017
 2. LOCATION N 1/4 SE 1/4 Sec 9 T 21 N 61 E Clark County
 PERMIT NO. _____ 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
Well was Abandon By Removing Casing & Screen, Pumping neat Cement From NE Bottom to the top.				

8. WELL CONSTRUCTION
 Depth Drilled 40 Feet Depth Cased 40 Feet
 HOLE DIAMETER (BIT SIZE)
 From _____ To _____
4 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>4.5</u>	<u>PVC</u>	<u>Set 40</u>	<u>0</u>	<u>20</u>

Perforations:
 Type perforation Slot & Screen
 Size perforation .020
 From 20 feet to 40 feet
 From _____ feet to _____ feet

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 AUG 13 1993
 Div. of Water Resources
 Branch Office - Las Vegas, NV

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level _____ 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 Water Environmental Contractor
 Address 4301 S. Valley View #21 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 M-1487
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 7-23-93

Date started 5-27 1993
 Date completed 5-27 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			