

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. **13107**

**BROADBENT & ASSOC**  
 1. OWNER **ARCO** ADDRESS AT WELL LOCATION **ARCO AM/PM 5313**  
 MAILING ADDRESS **1055 W. SEVENTH** **1550 NORTH RANCHO, LAS VEGAS**  
**LOS ANGELES CA 90051-0570** **NV**  
 2. LOCATION **SW 1/4 SW 1/4 Sec. 20 T. 20 N. R. 1 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 **W-2**  
 Domestic  Irrigation  Test  
 Municipal/Industrial  Monitor  Stock  
 5. WELL TYPE  
 Cable  Rotary  RVC  
 Air  Other **AUGER**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<b>PULLED CASING, DRILLED OUT FOREHOLE AND PLUGGED WITH CEMENT GROUT (3% BENTONITE)</b>				
<b>MONITOR WELL INSTALLED ON DEC 23 1989 UNDER NOTICE OF INTENT # 3081</b>				
<b>RECEIVED</b>				
JUN 9 1994				
Div. of Water Resources Branch Office - Las Vegas, NV				

8. WELL CONSTRUCTION

Depth Drilled \_\_\_\_\_ Feet Depth Cased \_\_\_\_\_ Feet

HOLE DIAMETER (BIT SIZE)

Inches	Feet	Feet
From _____	To _____	_____
_____	_____	_____
_____	_____	_____

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)

Perforations:

Type perforation \_\_\_\_\_  
 Size perforation \_\_\_\_\_

From	feet to	feet
From _____	_____	_____

Surface Seal:  Yes  No Seal Type:  
 Neat Cement  
 Cement Grout  
 Concrete Grout

Depth of Seal \_\_\_\_\_  
 Placement Method:  Pumped  Poured  
 Gravel Packed:  Yes  No  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Date started \_\_\_\_\_, 19\_\_\_\_  
 Date completed **JUNE 3**, 19**94**

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

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

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 **THOMAS HIGA** Contractor  
 Address **4670 50 SOLARIS AVE**  
**LAS VEGAS NV 89103** 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 **M1869**  
 Signed \_\_\_\_\_  
 By driller performing actual drilling on site or contractor  
 Date **6/7/94**