

OFFICE USE ONLY
 Log No. 45152
 Permit No. 60117-T
 Basin 222

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. 9948

1. OWNER Virgin Valley Water District ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS P.O. Box 276
Mesquite, NV 89024
 2. LOCATION SE $\frac{1}{4}$ NW $\frac{1}{4}$ Sec. 9 T. 13 N R 71 E Clark County
 PERMIT NO. 60117T 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	Thick-ness
Sand & Gravel		0	55	55
Hard Clay		55	110	55
Sandy Clay		110	390	280
Cemented Sand		390	480	90
Sandy Clay		480	790	310
Sandy Clay		790	900	110
Sandy, Gravelly Clay		900	1300	400
Sand		1300	1330	30
Sandy Clay		1330	1370	40
Sand		1370	1430	60
Sand, Gravel, & Clay		1430	1450	20
Sand		1450	1490	40
BACK Filled To 1450				
PER phone call TO				
MARK Schrenbrocker 8/22/94				
CEIVED				

8. WELL CONSTRUCTION
 Depth Drilled 1493 Feet Depth Cased 1450 Feet
 HOLE DIAMETER (BIT SIZE)
 From 30 Inches To 0 Feet 1493 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet
 CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
20		.375	0	570
20		.375	730	770
20		.375	850	930
20		.375	1090	1050
			1250	1170
			1410	1290
			1450	1450

Perforations: _____
 Type perforation Wire Wrapped Screen
 Size perforation 0.030 inch slot
 From 570 feet to 730 feet
 From 770 feet to 850 feet
 From 930 feet to 950 feet
 From 1050 feet to 1090 feet
 From 1290 feet to 1410 feet
 Surface Seal: Yes No Seal Type: _____
 Depth of Seal 170 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 170 feet to 1493 feet

9. WATER LEVEL
 Static water level 84 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 Layne-Western Contractor
 Address 3515 Losee Road Contractor
N. Las Vegas, NV 89030
 Nevada contractor's license number 0019101
 issued by the State Contractor's Board
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1290
 Signed M J Schenbrocker
 By driller performing actual drilling on site or contractor
 Date 8/22/94

Date started 6-26, 1994
 Date completed 7-18, 1994

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input checked="" type="checkbox"/> Pump <input type="checkbox"/> Air Lift	<u>2000</u>	<u>300 ft.</u>	<u>28</u>