WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

OFFICE USE ONLY
Log No. 45496
Permit No.
Basin 212

NOTICE OF INTENT NO. 13068

1. OWNER J.A. CESARE & ASSOCIATES
MAILING ADDRESS P.O. BOX 91029 HENDERSON NV 89009
ADDRESS AT WELL LOCATION LAKE AT LAS VEGAS, NEAR SE CORNER OF DAM

2. LOCATION NW ¼ SE ¼ Sec. 14 T. 21 N/S R. 63 E CLARK County
PERMIT NO. MO-2102 (Issued by Water Resources) | Parcel No. | Subdivision Name

3. WORK PERFORMED
☐ New Well ☐ Replace ☐ Recondition
☐ Deepen ☒ Abandon ☐ Other

4. PROPOSED USE PIEZOMETER #7
☐ Domestic ☐ Irrigation ☐ Test
☐ Municipal/Industrial ☑ Monitor ☐ Stock

5. WELL TYPE
☐ Cable ☒ Rotary ☐ RVC
☐ Air ☐ Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
PULLED CASING, PLUGGED WITH A BENTONITE (3%) CEMENT SLURRY.				
ORIGINAL INTENT TO DRILL #8447				

RECEIVED
MAR 17 1994
Div. of Water Resources
Branch Office - Las Vegas, NV

Date started 3/10, 1994
Date completed 3/10, 1994

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

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

8. WELL CONSTRUCTION
Depth Drilled ____ Feet Depth Cased ____ Feet

HOLE DIAMETER (BIT SIZE)
From / To
____ 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)

Perforations:
Type perforation
Size perforation
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: ☐ Yes ☐ No
Depth of Seal
Placement Method: ☑ Pumped ☐ Poured
Seal Type: ☐ Neat Cement ☐ Cement Grout ☐ Concrete Grout
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 DONALD WILSON
Contractor
Address 4670 SO. POLARIS AVE
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 M1589
Signed Donald J. Wilson
By driller performing actual drilling on site or contractor
Date MARCH 15, 1994

(Rev. 3-91) USE ADDITIONAL SHEETS IF NECESSARY (O)-627