

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

RECEIVED  
 OCT 30 1995  
 LAS VEGAS OFFICE

STATE OF NEVADA  
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY  
 Log No. **50801**  
 Permit No. **212**  
 Basin **212**

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 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. **9354**

1. OWNER **HLA** ADDRESS AT WELL LOCATION **3201 W TROPICANA AVE**  
 MAILING ADDRESS **4720 S DECATUR LN NV 89103**

2. LOCATION **NE 1/4 NW 1/4 Sec 8 T 21 N 61 E CITY** County  
 PERMIT NO. **MO-2571** 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 **AR**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<b>CLAY</b>		<b>0</b>	<b>8</b>	
<b>CLAY</b>		<b>8</b>	<b>12</b>	
<b>CLAY w SAND</b>		<b>12</b>	<b>28</b>	
<b>CLAY w SAND</b>		<b>28</b>	<b>40</b>	

8. WELL CONSTRUCTION  
 Depth Drilled **40** Feet Depth Cased **40** Feet

HOLE DIAMETER (BIT SIZE)  
 From **10** Inches To **0** Feet **40** Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>4.5</b>	<b>PVC</b>	<b>5/8</b>	<b>0</b>	<b>20</b>

Perforations:  
 Type perforation **SLOTTED SCREEN**  
 Size perforation **0.20**  
 From **20** feet to **40** feet

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

Placement Method:  Pumped  Poured

Gravel Packed:  Yes  No  
 From **20** feet to **40** feet

9. WATER LEVEL  
 Static water level **22** feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started **5-4** 19**95**  
 Date completed **5-4** 19**95**

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			

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Name **Wesley E. Williams, Inc** Contractor  
 Address **4720 S DECATUR LN NV 89103** Contractor

Nevada contractor's license number **0039528** 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 \_\_\_\_\_  
 By driller performing actual drilling on site or contractor

Date **10-12-95**