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. 54710
Permit No.
Basin 212
30203

NOTICE OF INTENT NO.

1. OWNER washington Construction Well #2
MAILING ADDRESS 1000 Lake Las Vegas Prkwy
Las Vegas, NV

ADDRESS AT WELL LOCATION Desert Inn Relocation
Swenson and Desert Inn
Las Vegas, NV

2. LOCATION NE ¼ NW ¼ Sec. 15 T. 21 N/S R. 61 E. CLARK County
PERMIT NO. W-1045 (Issued by Water Resources) 1662-15-101-013 (Parcel No.) Subdivision Name

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

4. PROPOSED USE D-W
☐ Domestic ☐ Irrigation ☐ Test
☐ Municipal/Industrial ☐ Monitor ☐ Stock

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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Wells were excavated out near				
depth of well; Inaccesible to				
Drilling Rig. Casing removed				
and replaced with Type II				
back to grade				

Date started 7/29/96, 19
Date completed 7/29/96, 19

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 ALLEN DRILLING INC. (Contractor)
Address 4847 S. VALLEY VIEW (Contractor)
LAS VEGAS, NV 89103
Nevada contractor's license number issued by the State Contractor's Board 18917
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1301
Signed Fred B. Allen Jr. (By driller performing actual drilling on site or contractor)
Date

USE ADDITIONAL SHEETS IF NECESSARY

(Rev. 3-91) (O)-627