DIVISION OF WATER RESOURCES

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLERS REPORT

Please complete this form in its entirety

Log No 56423 ONLY
Permit No.
Basin 212

1. OWNER Ben Hoffman ADDRESS 5824 Chapparral Road

2. LOCATION NE ¼ NW ¼ Sec. 34 T. 21 N/S R. 61 E Clark County
PERMIT NO.

3. TYPE OF WORK
New Well ☐ Recondition ☐
Deepen ☒ Other ☐

4. PROPOSED USE
Domestic ☒ Irrigation ☐ Test ☐
Municipal ☐ Industrial ☐ Stock ☐

5. TYPE WELL
Cable ☒ Rotary ☐
Other ☐

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Light Brown Clay		70	90	20
Brown Clay		90	100	10
Light Brown Clay		100	109	9
Brown Clay		109	120	11
Brown Clay	XX	120	135	15
Brown Clay		135	150	15
Brown Clay	XX	150	160	10
Brown Clay		160	180	20
Brown Clay & Gravel	XX	180	200	20

RECEIVED
JAN 26 1970
DIV. OF WATER RESOURCES
BRANCH OFFICE
LAS VEGAS, NEVADA

Date started 9/17/69, 19
Date completed 9/20/69, 19

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump
		126ft.	

BAILER TEST
G.P.M. Draw down feet hours
G.P.M. Draw down feet hours
G.P.M. Draw down feet hours

8. WELL CONSTRUCTION
Diameter hole 8 inches Total depth 200 feet
Casing record 6in ID from 70 to 200ft.
Weight per foot 10 gauge Thickness

Diameter		From		To	
8in.	inches	70	feet	200	feet
	inches		feet		feet
	inches		feet		feet
	inches		feet		feet
	inches		feet		feet
	inches		feet		feet

Surface seal: Yes ☐ No ☐ Type
Depth of seal feet
Gravel packed: Yes ☐ No ☐
Gravel packed from feet to feet

Perforations:
Type perforation torch cut
Size perforation 3 rows 3/16in X 12in
From XXX 80 feet to 200 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

9. WATER LEVEL
Static water level 26 Feet below land surface
Flow G.P.M.
Water temperature ° F. Quality

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

Name S.R. McKinney and Sons Inc.
Address 1042 S. Main St.
Nevada contractor's license number 2065
Nevada driller's license number 45
Signed [signature]
Date 1-26-70

USE ADDITIONAL SHEETS IF NECESSARY

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