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 58174
Permit No.
Basin 212

NOTICE OF INTENT NO. 17565

1. OWNER Black + Veatch
MAILING ADDRESS 1900 E. Flamingo Rd, Ste 295
Las Vegas, NV 89119

ADDRESS AT WELL LOCATION Valley View Blvd. at Mountain View Boulevard

2. LOCATION NE ¼ SE ¼ Sec. 6 T. 21 N(S) R. 61 E. Clark County
PERMIT NO. MO-2724 (Issued by Water Resources) | Parcel No. not available | Subdivision Name

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

4. PROPOSED USE MW-1
☐ Domestic ☐ Irrigation ☐ Test
☐ Municipal/Industrial ☒ Monitor ☐ Stock

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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Abandoned 2" monitoring flush mounted well by pulling casing and backfilling hole with bentonite.				
well originally installed under NOI # ~~[illegible]~~ and MO-2724. 17552				

Date started 7/25, 19 96
Date completed 7/25, 19 96

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)
____ Inches From ____ Feet To ____ Feet
____ Inches From ____ Feet To ____ Feet
____ Inches From ____ Feet To ____ 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 Thomas High (Contractor)
Address 731 Pilot Rd., Suite A (Contractor)
Las Vegas, NV 89119
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 M1869
Signed (By driller performing actual drilling on site or contractor)
Date 10/8/96

USE ADDITIONAL SHEETS IF NECESSARY

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