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. 65837
Permit No.
Basin 212

NOTICE OF INTENT NO. 12092

1. OWNER CLARK COUNTY SCHOOL DISTRICT
MAILING ADDRESS 1700 GALLERIA BLDG C
HENDERSON NV 89014

ADDRESS AT WELL LOCATION RCW TRANSPORTATION CENTER, 4499 SO. ARVILLE STREET, LAS VEGAS NV

2. LOCATION SE ¼ NW ¼ Sec. 19 T. 21 N/S R. 61 E. CLARK County
PERMIT NO. MO-2292 (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

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thickness |
|---|---|---|---|---|
| REMOVED CASING, DRILLED OUT | | | | |
| AND GROUTED TO SURFACE | | | | |
| WITH CEMENT/BENTONITE SLURRY | | | | |
| (10 SACK SLURRY) | | | | |
| DRILL NOI # 10762 | | | | |

RECEIVED
NOV 02 1993
Div. of Water Resources
Branch Office - Las Vegas, NV

Date started July 16, 19 93
Date completed July 16, 19 93

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 DON WILSON
Address 4670 So POLARIS AVE (Contractor)
LAS VEGAS NV 89103 (Contractor)
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 (By driller performing actual drilling on site or contractor)
Date 11-1-93

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