

PRINT OR TYPE ONLY
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. **13917**
ADDRESS AT WELL LOCATION **1615 DECATUR BLVD**

1. OWNER **ARCO 40 BROADBENT + ASSOC**
MAILING ADDRESS **833 NEVADA HWY STE 4**
~~PO BOX~~ **PO BOX LITTA NV 89005**

ADDRESS AT WELL LOCATION **1615 DECATUR BLVD**
MOBILE DECATUR + VEGAS DR

2. LOCATION **SE 1/4 SE 1/4 Sec. 24 T. 20 N. R. 60 E. CLARK** County **CLARK**
PERMIT NO. **MO-2446A** Issued by Water Resources **DNKNOV01** Parcel No. **2446A** Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition Deepen Abandon Other
4. Domestic Municipal/Industrial Monitor Test Stock Air Other
5. WELL TYPE Cable Rotary RVC

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
ASPHALT FILL		0	3	3
GRAVEL		3	4.5	1.5
CEMENTED GRAVEL		4.5	6	1.5
SAND-SILT-CLAY		6	14.5	8.5
GRAVEL		14.5	18	3.5
SILTY CLAY		18	25	7

8. WELL CONSTRUCTION

Depth Drilled	WELL CONSTRUCTION	Depth Cased
25	HOLE DIAMETER (BIT SIZE)	25
	From	To
	8 Inches	0 Feet
	0 Inches	25 Feet
	0 Inches	25 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4.5	1.9	0.237	0	25

Perforations:
Type perforation **FACTORY SLOT**
Size perforation **0.020**
From **5** feet to **25** feet
From **5** feet to **25** feet

Surface Seal: Yes No Seal Type: Neat Cement Cement Grout Concrete Grout
Depth of Seal **0-2 1/2 - 4' BEAUTONITE**
Placement Method: Pumped Poured

Gravel Packed: Yes No
From **4** feet to **25** feet

9. WATER LEVEL
Static water level **9.66** feet below land surface
Artesian flow **G.P.M.** P.S.I.
Water temperature **°F** Quality **°F**

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision and the report is true to the best of my knowledge.
Name **DONALD WILSON** Contractor
Address **41670 30. GOLLAERIS AVE**
LAS VEGAS NV 89103 Contractor

Nevada contractor's license number **141589**
issued by the State Contractor's Board
Nevada driller's license number issued by the Division of Water Resources, the on-site driller **141589**
Signed **Donald Wilson**
By driller performing actual drilling on site or contractor
Date **1-11-95**

7. WELL TEST DATA
TEST METHOD: Bailor Pump Air Lift
G.P.M. (Feet Below Static) Time (Hours)

Date started	Date completed	G.P.M.	Time (Hours)
Dec 4 1994	Dec 4 1994		