

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. **1660333**
Permit No. **212**
Basin

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

NOTICE OF INTENT NO. **13917**

1. OWNER **ARND & BROADBENT & ASSOC.** ADDRESS AT WELL LOCATION **1615 DECATUR BLVD**
MAILING ADDRESS **833 NEVADA HWY STE 4** **BLVD DECATUR & VEGAS DR.**

2. LOCATION **SE 1/4 SE 1/4 Sec. 24 T. 20 N. R. 20 E. CLARK** County
NO. 216 A UNKNOWAN Parcel No.

3. WORK PERFORMED
 New Well Replace Recondition Deepen Abandon Other
PROPOSED USE **IND-4** WELL TYPE Domestic Irrigation Test Stock Air Rotary RVC
 Municipal/Industrial Monitor

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
ASPHALT/FLU		0	2	2
CLAYCHE		2	5	3
SILT SAND		5	10	5
SANDY SILT-CLAYNW		10	15	5
CLAYCHE		15	17.5	2.5
SAND SILT-CLAYNW		17.5	25	7.5

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

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4.5	1.9	0.037	0	25

Perforations:
Type perforation **FACTORY SLOT**
Size perforation **5 0.025** feet to **25** feet
From **5** feet to **25** feet

Surface Seal: Yes No Seal Type:
Depth of Seal **0-11-3' BENTONITE** Neat Cement
Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
From **3** feet to **25** feet

9. WATER LEVEL
Static water level **9.53** 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 **DONALD WILSON** Contractor
Address **41070 S. VEGAS AVE**
LAS VEGAS NV 89103 City/State/Zip

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 **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. _____ Draw Down (Feet Below Static) _____ Time (Hours) _____
Date started **Dec 4** 19 **94**
Date completed **Dec 4** 19 **94**