

Office Use Only
Log No. **160063**
Permit No. **212**
Basin **212**

NOTICE OF INTENT NO. **9172**

PRINT OR TYPE ONLY

WELL DRILLER'S REPORT
Please complete this form in its entirety

1. OWNER **William Kuhn Magie Wand**

ADDRESS AT WELL LOCATION

MAILING ADDRESS: **1100 EAST CENTRAL AVENUE
ADRIAN LAS VEGAS, NV. 89002**

ADDRESS AT WELL LOCATION: **M/S R. 61 E CLARK** County

2. LOCATION: **NW 1/4 SE 1/4 Sec. 11 T 20 N 35 R. 61 E**

Parcel No.

Subdivision Name

3. TYPE OF WORK
New Well Recondition
Deepen Other

4. Domestic
Municipal

PROPOSED USE
Irrigation
Industrial
Stock
Test

5. TYPE WELL
Cable
Rotary
Other

6. LITHOLOGIC LOG

8. WELL CONSTRUCTION

Material	Water Strata	From	To	Thickness
ASPHALT		0	15'	15'
FILL		15'	5'	45'
SANDY SILT w/c log		5'	19'	14'
Silty clay		19'	21'	2'
Caliche		21'	22'	1'
Silty clay		22'	25'	3'
clayey silt		25'	31'	6'
Silty clay		31'	40'	9'
clayey silt		40'	53'	13'
Silty clay		53'	60'	17'

Diameter: **2** inches Total depth: **60** feet

Casing record: **35' GALVAN. 25' SCREEN**
Weight per foot: **0.2016** Thickness: **SKH 40 PVC**

Diameter **2** inches From **0** feet To **60** feet
inches inches feet feet feet feet

Surface seal: Yes No Type **Advent cement**

Depth of seal: **0-25** feet

Gravel packed: Yes No
Gravel packed from **28** feet to **60** feet

Perforations:

Type perforation **Fakory slotted**
Size perforation **0.020**
From **35** feet to **60** feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

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Branch Office - Las Vegas, NV

9. WATER LEVEL
Static water level: _____ feet below land surface
Flow: _____ G.P.M. P.S.I.
Water temperature: _____ °F Quality _____

Date started: **April 9** 19**91**
Date completed: **April 9** 19**91**

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** Contractor
Address: **4070 S. ROYALS AVE. LV, NV 89103** Contractor

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	Alter Hours Pump

BAILER TEST

G.P.M. _____ feet _____ hours
G.P.M. _____ feet _____ hours
G.P.M. _____ feet _____ hours

Nevada contractor's license number _____
issued by the State Contractor's Board
Nevada contractor's driller's number _____
issued by the Division of Water Resources
Nevada driller's license number issued by the _____
Division of Water Resources, the on-site driller: **H1589**
Signed: **Dennis M. [Signature]**
By driller performing actual drilling on site or contractor