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. 66350
Permit No.
Basin 218

NOTICE OF INTENT NO. 17546

1. OWNER NEVADA POWER COMPANY
MAILING ADDRESS 6226 W. SAHARA AVE. P.O. BOX 230, LAS VEGAS NV 89151
ADDRESS AT WELL LOCATION ASH FLY LANDFILL REID GARDNER FACILITY MOAPA, NV

2. LOCATION ¼ ¼ Sec. 5 T. 15 N/S R. 66 E. CLARK County
PERMIT NO. MO-2309 Issued by Water Resources | Parcel No. | 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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
ATTEMPTED TO PULL PVC CASING				
ABANDONED WELL BY PRESSURE GROUTING WITH CEMENT GROUT CONTAINING 3% BENTONITE.				
WELL DRILLED UNDER MO-2309 INTENT #12096 ON AUGUST 7, 1993				

Date started APRIL 22, 1996
Date completed APRIL 22, 1996

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 THOMAS HIGH
Contractor
Address 731 PILOT RD STE H
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 Tom High
By driller performing actual drilling on site or contractor
Date 6-17-96

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