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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. 23651

1. OWNER LAS VEGAS PAVING CORP ADDRESS AT WELL LOCATION SOUTH ON LAMB BETWEEN RAWHIDE & RUSSELL
MAILING ADDRESS 3401 N 5TH ST
N LV NV 89030

2. LOCATION 1/4 Sec 29 T 21 N/S/R 62 @ CLARK County
PERMIT NO. DW 1010 Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other

4. PROPOSED USE
 Dewatering Domestic Irrigation Test
 Municipal/Industrial Monitor Stock

5. WELL TYPE
 Cable Rotary RVC
 Air Other BUCKET

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>TOP SOLE</u>		<u>0</u>	<u>1</u>	<u>1</u>
<u>SANDY SOLE</u>		<u>1</u>	<u>9</u>	<u>8</u>
<u>WHITE CLAY</u>		<u>9</u>	<u>18</u>	<u>9</u>
<u>RED CLAY w/ SAND</u>		<u>18</u>	<u>40</u>	<u>22</u>

8. WELL CONSTRUCTION
Depth Drilled 40 Feet Depth Cased 40 Feet

HOLE DIAMETER (BIT SIZE)
From 0 To 40
2 1/4" Inches Feet
Inches Feet
Inches Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>12</u>			<u>0</u>	<u>40</u>

Perforations:
Type perforation SPAW CUT
Size perforation .040
From 20 feet to 40 feet
From feet to feet
From feet to feet
From feet to feet

Surface Seal: Yes No Seal Type:
 Neat Cement
Depth of Seal _____ Cement Grout
Placement Method: Pumped Concrete Grout
 Poured
Gravel Packed: Yes No
From 0 feet to 40 feet

9. WATER LEVEL
Static water level 9 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 Foot Hills Eng. Contractor
Address 905 E. 3RD ST Contractor
CORONA CAL.
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 1567
Signed Chuck W Sewell
By driller performing actual drilling on site or contractor
Date 3-18

Date started 3-18, 1993
Date completed 3-18, 1993

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			

RECEIVED
MAR 23 1993
Div. of Water Resources
Branch Office - Las Vegas, NV