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

Book

OFFICE USE ONLY
Log No. 69537
Permit No.
Basin 212

NOTICE OF INTENT NO. 16204

1. OWNER Kerr McGee
MAILING ADDRESS 8000 W. Lake Mead Dr, Henderson, NV
ADDRESS AT WELL LOCATION Kerr McGee 8000 W. LAKE MEAD DR, HENDERSON NV

2. LOCATION SE ¼ NE ¼ Sec. 12 T. 22 N/S R. 62 E. CLARK County
PERMIT NO. N/A Issued by Water Resources
210-110-002
210-420-002 Parcel No.
BMI Complex Subdivision Name

3. WORK PERFORMED
☐ New Well ☐ Replace ☐ Recondition
☐ Deepen ☒ Abandon ☐ Other

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

5. WELL TYPE
☐ Cable ☐ Rotary ☐ RVC
☐ Air ☐ Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Abandonment of five ~~four~~-inch monitor wells per NDWR Regulations.				
5 (4" x 40') monitor wells				

DOWNWRD Received DEC 12 1997 LAS VEGAS OFFICE

Date started 7-29-1997
Date completed 7-29-1997

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 40 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 Weber Drilling Services Contractor
Address 115 So. Weber Dr. Suite 1 Contractor
Chandler, Az 85224
Nevada contractor's license number issued by the State Contractor's Board 39528
Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-2057
Signed [signature] By driller performing actual drilling on site or contractor
Date 8-29-97

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