

STATE OF NEVADA  
 DIVISION OF WATER RESOURCES  
 WELL DRILLER'S REPORT

OFFICE USE ONLY  
 Log No. **70145**  
 Permit No. **212**  
 Basin. **212**

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. **12000**

1. OWNER **HIA** ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS **4170 S. DECATUR AVE** **McCARRAN AIRPORT**  
**Las Vegas NV 89109**  
 2. LOCATION **E 1/4 NW 1/4 Sec 33 T 21 N 61 E Clark** County  
 PERMIT NO. **MO-2320** Issued by Water Resources Parcel No. 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 **ANALYZER**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<b>Clays w/ calcifer layers</b>		<b>0</b>	<b>56</b>	
<b>Clays w/ sand and some lines</b>		<b>56</b>	<b>60</b>	
<b>Water was cemented from bottom to top</b>				

8. WELL CONSTRUCTION  
 Depth Drilled **60** Feet Depth Cased **NA** Feet  
 HOLE DIAMETER (BIT SIZE)  
 From **0** Inches To **60** Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>NA</b>				

Perforations:  
 Type perforation **NA**  
 Size perforation \_\_\_\_\_  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Neat Cement  
 Cement Grout  
 Concrete Grout  
 Depth of Seal **60**  
 Placement Method:  Pumped  Poured  
 Gravel Packed:  Yes  No  
 From **NA** feet to \_\_\_\_\_ feet

9. WATER LEVEL  
 Static water level **57** feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started \_\_\_\_\_, 19\_\_\_\_  
 Date completed \_\_\_\_\_, 19\_\_\_\_

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			

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name **Weber Environmental** Contractor  
 Address **4301 S. Valley View #21** Contractor  
**Las Vegas NV 89109**  
 Nevada contractor's license number issued by the State Contractor's Board **C-2310035639**  
 Nevada driller's license number issued by the Division of Water Resources; the on-site driller **M-1487**  
 Signed **[Signature]**  
 By driller performing actual drilling on site or contractor  
 Date **10-25-93**