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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. **16517**

1. OWNER **Nellis AFB 99ABW/EMC** ADDRESS AT WELL LOCATION **Nellis AFB**  
 MAILING ADDRESS **4349 Duffer** **Site 30**  
**Nellis AFB NV 89191-7007**

2. LOCATION **NE 1/4 NE 1/4 Sec. 3 T. 20 N. R. 62 E Clark** County  
 PERMIT NO. **190-10-101-601**

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 **Auger**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<b>Silty gravelly sand</b>		<b>0</b>	<b>12</b>	<b>12</b>
<b>Silty sand</b>		<b>12</b>	<b>20</b>	<b>8</b>
<b>Silty clay</b>		<b>20</b>	<b>41</b>	<b>21</b>
<b>clay</b>		<b>41</b>	<b>70</b>	<b>29</b>

8. WELL CONSTRUCTION  
 Depth Drilled **70** Feet Depth Cased **70** Feet

HOLE DIAMETER (BIT SIZE)  
 From To  
**8** Inches **0** Feet **70** Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>1 1/2"</b>		<b>1/8</b>	<b>0</b>	<b>67'</b>
<b>1"</b>		<b>1/8</b>	<b>0</b>	<b>45'</b>
<b>1"</b>		<b>1/8</b>	<b>0</b>	<b>20'</b>

Perforations:  
 Type perforation **Factory Slotted**  
 Size perforation **.030**

From **67** feet to **68** feet  
 From **45** feet to **46** feet  
 From **20** feet to **21** feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal **18'**  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout

Gravel Packed:  Yes  No  
 From **18** feet to **70** feet

9. WATER LEVEL  
 Static water level **74'** feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started **August 29 1997**  
 Date completed **August 29 1997**

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

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**  
 Address **1210 Sharp Circle**  
**N. Las Vegas NV 89030**

Nevada contractor's license number issued by the State Contractor's Board **38527**  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **2057**

Signed **[Signature]**  
 By driller performing actual drilling on site or contractor  
 Date **9-20-97**