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. 75367
Permit No.
Basin 212

NOTICE OF INTENT NO. 15615

1. OWNER Melvin Shapiro/AL PHILLIPS Cleaning
MAILING ADDRESS 3250 ALI BABA LANE
LV NV 89118

ADDRESS AT WELL LOCATION 3100 W Sahara
LV. Nev.

2. LOCATION ¼ SW ¼ Sec. 5 T 21 S/S R 61 E CLARK County
PERMIT NO. Issued by Water Resources | 162054020021 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	Thickness
Asphalt		0	6"	0.5
Subgrade		6"	12"	0.5
Silty Clay		12"	8'	7.0
Caliche		8.0	10.0	2.0
Silty Clay Sand	12.5	10.0	25	15'

Date started Sept 23, 1998
Date completed Sept 23, 1998

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
6 Inches	0 Feet	25 Feet	
Inches	Feet	Feet	
Inches	Feet	Feet	

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2 1/4		1/8	0	25

Perforations:
Type perforation Factory Slotted
Size perforation 020
From 10 feet to 25 feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: ☒ Yes ☐ No
Depth of Seal 6
Placement Method: ☐ Pumped ☒ Poured
Seal Type: ☐ Neat Cement ☐ Cement Grout ☒ Concrete Grout

Gravel Packed: ☒ Yes ☐ No
From 8 feet to 25 feet

9. WATER LEVEL
Static water level 12.5 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 Compliance Drilling (Contractor)
Address P.O Box 94136 (Contractor)
LV NV 89193
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 M 2057
Signed ____ (By driller performing actual drilling on site or contractor)
Date Sept 25, 1998

USE ADDITIONAL SHEETS IF NECESSARY

(Rev. 3-91) (O)-627