

DRILL 45 WELLS

WHITE—DIVISION OF WATER RESOURCES
 CANARY—CLIENT'S COPY
 PINK—WELL DRILLER'S COPY

STATE OF NEVADA
 DIVISION OF WATER RESOURCES

OFFICE USE ONLY
 Log No. 76220
 Permit No. _____
 Basin 21a

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

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. 5270

1. OWNER CLARK County Sanitation ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 5857 E PLAMINHO _____
LV NV 89102 _____
 2. LOCATION NE 1/4 NE 1/4 Sec. 27 T. 21 S. N/S R. 62 E CLARK County
 PERMIT NO. DW1094 161-27-599-002401 TROPICANA EAST
Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other DWATER

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
<u>ASPHALT & TYPE 2</u>		<u>0</u>	<u>2</u>	<u>2 FT</u>
<u>DRY SILT & CLAY</u>		<u>2</u>	<u>9.5</u>	<u>7.5</u>
<u>WET SILT, SANDY CLAY</u>	<u>X</u>	<u>9.5</u>	<u>20</u>	<u>11.5</u>
<u>well 08</u>				

8. WELL CONSTRUCTION
 Depth Drilled 20 Feet Depth Cased WELL POINT Feet

HOLE DIAMETER (BIT SIZE)
 From To
12 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 SAND SCREEN
 Size perforation _____

From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Placement Method: Pumped Poured

Gravel Packed: Yes No
 From 20 feet to _____ feet

9. WATER LEVEL
 Static water level 8 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature cool °F Quality _____

Date started 9-2, 1998
 Date completed 9-7, 1998

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 Southwest Paving Contractor
 Address _____ Contractor

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 1661
 Signed Donald L. Welch
By driller performing actual drilling on site or contractor
 Date 9-15-98