

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

OFFICE USE ONLY
 Log No. 76864
 Permit No. _____
 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. 41737

1. OWNER CLARK COUNTY SANITATION DIST ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS 5857 FLAMINGO RD. DESERT INN @ STEPHANIE
CAS VEGAS, NV 89122

2. LOCATION N 1/4 NE 1/4 Sec. 9 T. 21 N/S R. 62 E CLARK County _____
 PERMIT NO. DW-1105 Parcel No. 101-15-101-002 Subdivision Name DESERT INN @ STEPHANIE

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

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

5. WELL TYPE
 Cable Rotary RVC
 Air Other BUCKET

6. 40-50 LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>0-7' DIRT BACKEN</u>				
<u>7-18' SILTY CLAYS</u>				<u>14'</u>
<u>18-20' COARSE</u>				
<u>20-30' SILTY SANDS</u>				
<u>30-40' SILTY CLAY</u>				

8. WELL CONSTRUCTION
 Depth Drilled 40 Feet Depth Cased 40 Feet

HOLE DIAMETER (BIT SIZE)
 From 72 Inches To 40 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6</u>	<u>PVC</u>	<u>SCM-40</u>	<u>0</u>	<u>40</u>

Perforations:
 Type perforation Factory Slot
 Size perforation 1/2"
 From 40 feet to 20 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

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

Depth of Seal _____
 Placement Method: Pumped Poured

Gravel Packed: Yes No
 From 0 feet to 40 feet

9. WATER LEVEL
 Static water level 14' feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature 70 °F Quality Good

Date started 9-1, 1999
 Date completed 9-8, 1999

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	<u>40</u>	<u>10</u>	<u>1-HR</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name FOOTHILL ENG & DRAINING Contractor
 Address 905 E. THIRD ST. CORONA, CA 91719 Contractor
 Nevada contractor's license number 0035906 issued by the State Contractor's Board.
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-2119
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 9-8-99