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. 77574
Permit No.
Basin 0218

NOTICE OF INTENT NO. 18532

1. OWNER Nevada Department of Transportation
MAILING ADDRESS 1263 S. Stewart St., Room 104A
Carson City, NV 89712

ADDRESS AT WELL LOCATION SR168 and I-15 NDOT
Maintenance Yard, Glendale NV

2. LOCATION NE 1/4 NE 1/4 Sec. 2 T T15S N/S R R66E E Clark County
PERMIT NO. _____ Issued by Water Resources | 690-200-011 Parcel No. | MW-2 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
Attempted to pull 4-inch casing. Well was plugged with neat cement grout. Well was originally drilled in late 1990.				

Date started 8/31/1999 , 19__
Date completed 8/31/1999 , 19__

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
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 _____
Size perforation _____
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Surface Seal: ☐ Yes ☒ No
Depth of Seal _____
Placement Method: ☐ Pumped ☐ Poured
Seal Type: ☐ Neat Cement ☐ Cement Grout ☐ Concrete Grout
Gravel Packed: ☐ Yes ☒ No
From _____ feet to _____ feet

9. WATER LEVEL
Static water level _____ 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 Thomas High c/o Converse Consultants
Contractor
Address 731 Pilot Road, Suite H
Contractor
Las Vegas, NV 89119
Nevada contractor's license number issued by the State Contractor's Board 48947
Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-1869
Signed _____
By driller performing actual drilling on-site or contractor
Date 12/10/99

USE ADDITIONAL SHEETS IF NECESSARY