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. 77581
Permit No.
Basin 218

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-10 (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 between 1991 and 1993.				

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-1868
Signed (By driller performing actual drilling on-site of contractor)
Date 12/10/99

USE ADDITIONAL SHEETS IF NECESSARY