

OFFICE USE ONLY
 Log No. 779514
 Permit No. _____
 Basin. 212

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. 165762

1. OWNER Contri ADDRESS AT WELL LOCATION On Broadbent
 MAILING ADDRESS LV NV W of Rebel Rd

2. LOCATION 1/4 Sec. 29 T. 21 N/S R. 62 E Clark County
 PERMIT NO. DW1110 161-26-202-005 Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other _____
 4. PROPOSED USE de-water WELL TYPE
 Domestic Irrigation Test Cable Rotary RVC
 Municipal/Industrial Monitor Stock Air Other Bucket

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Asphalt</u>		<u>0</u>	<u>6"</u>	
<u>Fill</u>		<u>6"</u>	<u>3</u>	
<u>Sandy clay</u>		<u>3</u>	<u>25</u>	
<u>Sand + gravel</u>		<u>25</u>	<u>30</u>	

8. WELL CONSTRUCTION
 Depth Drilled 0 Feet Depth Cased 30 Feet
 HOLE DIAMETER (BIT SIZE)
 From 0 To 30
24 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)
<u>8</u>	<u>PVC</u>	<u>Sch 40</u>	<u>0</u>	<u>30</u>

Perforations:
 Type perforation slot
 Size perforation .032
 From _____ feet to _____ feet
 From 10 feet to 30 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
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From 10 feet to 30 feet

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

Date started 12-14 1999
 Date completed 12-16 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			

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name GDC Contractor
 Address 91761 Contractor

Nevada contractor's license number issued by the State Contractor's Board 31246
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M1468
 Signed [Signature]
 By either performing actual drilling on site or contractor
 Date _____

