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

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

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

OFFICE USE ONLY
Log No. 78022
Permit No.
Basin 212

NOTICE OF INTENT NO. 19650

1. OWNER Clark Co. Sanitation District
MAILING ADDRESS 5857 E. Flamingo Rd.
Las Vegas, NV 89122
ADDRESS AT WELL LOCATION 5857 E. Flamingo Rd.
APN#161-22-101-001
Las Vegas, NV

2. LOCATION N1/2 ¼ NW ¼ Sec. 22 T. 21S N/S R. 62 E. CLARK County
PERMIT NO. Issued by Water Resources
161-22-101-001 Parcel No.
CENTRAL PLANT BAR SCREEN FAC. 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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Abandon 1 Monitor well				
Per Dean Goodal of DWR				
ok to pump concrete from top				
Pressure grouted 2 yards				
27 sack cement slurry.				

Date started 11/12, 1999
Date completed 11/12, 1999

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)
____ Inches From ____ Feet To ____ Feet
____ Inches From ____ Feet To ____ Feet
____ Inches From ____ Feet To ____ 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 90
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 12 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 ALLEN DRILLING INC.
Address 4847 S. VALLEY VIEW
LAS VEGAS, NV 89103 Contractor
Nevada contractor's license number 18916 issued by the State Contractor's Board
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1376
Signed ____ By driller performing actual drilling on site or contractor
Date

(Rev. 3-91)

USE ADDITIONAL SHEETS IF NECESSARY

(O)-627