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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. **19481**

1. OWNER **Johnie Collmar** ADDRESS AT WELL LOCATION **Vacant**
MAILING ADDRESS _____

2. LOCATION **NW 1/4 SE 1/4 Sec. 12 T 19 N/S R. 60 E Clark** County
PERMIT NO. **125-12-701-009**
Issued by Water Resources Parcel No. 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	Thick-ness
Popcorn Caliche		0	22	
Caliche		22	24	
Clay		24	56	
Caliche		56	60	
Clay		60	210	
Caliche & Water	xx	210	220	
Clay		220	360	
Caliche & Water	xx	360	380	
Clay		380	470	
Caliche & Water	xx	470	500	

8. WELL CONSTRUCTION
Depth Drilled **500** Feet Depth Cased **500** Feet

HOLE DIAMETER (BIT SIZE)
From To
12 1/4 Inches **0** Feet **50** Feet
8 3/4 Inches **50** Feet **500** Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8 5/8	16.94	.188	+2	50
5 1/2	SRD 21	PVC	+1	500

Perforations:
Type perforation **Factory**
Size perforation **Slotted Type**
From **455** feet to **495** feet
From _____ feet to _____ feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
Depth of Seal **50** Neat Cement
Placement Method: Pumped Cement Grout
 Toured Concrete Grout
Gravel Packed: Yes No
From _____ feet to _____ feet

9. WATER LEVEL
Static water level **140** feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature **cool** °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 **Vernon H. Dimick** Contractor
Address **5360 Bonita Vista** Contractor
Las Vegas, Nev. 89149

Nevada contractor's license number **10062** issued by the State Contractor's Board
Nevada driller's license number issued by the **552** Division of Water Resources, the on-site driller
Signed **V. Dimick**
By driller performing actual drilling on site or contractor
Date **1-24-2000**

Date started **1/17/2000**, 19_____
Date completed **1/24/2000**, 19_____
7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

