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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. **20312**

1. OWNER **Contr. Construction** ADDRESS AT WELL LOCATION **at Bull Creek & Hollywood + Blood bend**  
 MAILING ADDRESS **LV NV**

2. LOCATION  $\frac{1}{4}$  Sec **26** T **21** NS R **69** E **Clark** County  
 PERMIT NO. **DW110** Issued by Water Resources Parcel No. **161-26-302-001** Subdivision Name \_\_\_\_\_

3. WORK PERFORMED  
 New Well  Replace  Recondition  Deepen  Abandon  Other \_\_\_\_\_

4. Dewater PROPOSED USE  
 Domestic  Irrigation  Test  Municipal/Industrial  Monitor  Stock

5. WELL TYPE  
 Cable  Rotary  RVC  Air  Other **BK**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<b>total 86</b>				
<b>Swells in this Part</b>				
<b>Sand + Gravel w/ Boulders</b>		<b>0</b>	<b>16</b>	
<b>Sand + Gravel w/ clay</b>		<b>16</b>	<b>30</b>	

8. WELL CONSTRUCTION  
 Depth Drilled **30** Feet Depth Cased **30** Feet

HOLE DIAMETER (BIT SIZE)  
 From **24** Inches To **30** Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>8</b>	<b>PVC</b>	<b>Sch 40</b>	<b>0</b>	<b>30</b>

Perforations:  
 Type perforation **slot**  
 Size perforation **.030**

From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to **30** feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Neat Cement  
 Cement Grout  
 Concrete Grout

Depth of Seal \_\_\_\_\_  
 Placement Method:  Pumped  Poured

Gravel Packed:  Yes  No **30**  
 From **0** feet to **30** feet

Date started **1-27-2000**, 19\_\_\_\_  
 Date completed **1-27-2000**, 19\_\_\_\_

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

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

9. WATER LEVEL  
 Static water level **8** 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 **Michael** Contractor  
 Address **536 E Ontario CA** Contractor  
 Nevada contractor's license number **31246** issued by the State Contractor's Board.  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **M1968**

Signed **[Signature]**  
 Date \_\_\_\_\_