

STATE OF NEVADA  
 DIVISION OF WATER RESOURCES  
**WELL DRILLER'S REPORT**

OFFICE USE ONLY  
 Log No. **80308**  
 Permit No. \_\_\_\_\_  
 Basin **212**  
 NOTICE OF INTENT NO. **20673**

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

1. OWNER **TURNBERRY PAVILLION PARTNERS** ADDRESS AT WELL LOCATION **2777 PARADISE RD.**  
 MAILING ADDRESS **2777 PARADISE RD.** LAS VEGAS, NV 89109 **9 WELLS**  
 2. LOCATION **NE 1/4 SE 1/4 Sec 9 T 21 N/S R 61 E CLARK** County  
 PERMIT NO. **DW1119** 162-09-602-006 TOWER II  
 Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Abandon  Other **Dewater**  
 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
<b>9-50' DEWATER WELLS</b>				
Fill		0'	2'	
Caliche		2'	4'	
Clay, silt, brown-dry		4'	12'	
Clay, sand & gravel-wet		12'	22'	
Brown clay-dry		22'	27'	
Brown clay sand with gravel		27'	29'	
Caliche		29'	35'	
Clay, sand & gravel-wet		35'	45'	
Sandy silt		45'	50'	

8. WELL CONSTRUCTION  
 Depth Drilled **50'** Feet Depth Cased **50'** 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)
14	36.71	1.250	0	50

Perforations: MACHINE  
 Type perforation \_\_\_\_\_  
 Size perforation **1/4" x 2 1/2" x 3 rows @ 13**  
 From **10** feet to **50** 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  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

9. WATER LEVEL  
 Static water level **14'** feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started **6/22**  
 Date completed **7/16**

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.  
**ALLEN DRILLING INC.**  
 Name \_\_\_\_\_ Contractor  
 Address **4847 S. VALLEY VIEW** Contractor  
**LAS VEGAS, NV 89103**  
 Nevada contractor's license number **18917**  
 issued by the State Contractor's Board  
 Nevada driller's license number issued by the **ABDS2161**  
 Division of Water Resources, the on-site driller  
 Signed *[Signature]*  
 By driller performing actual drilling on site or contractor  
 Date **7-13-00**