

PRINT OR TYPE ONLY
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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. **20330**

1. OWNER **Lake Mead Constructors** ADDRESS AT WELL LOCATION **243 B Lake Shore Drive**
MAILING ADDRESS **L.V. NV**

2. LOCATION $\frac{1}{4}$ NW $\frac{1}{4}$ Sec. **23 22 N 64 E Clark** County **Clark**
PERMIT NO. **DW 1120** Issued by Water Resources Parcel No. **181-03-000-004** Subdivision Name **(10 Wells)**

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other _____

4. PROPOSED USE **Dewater** 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
Sandy Dirt w/ cobbles + some boulders		0	16	16
Med-coarse sand + gravel		16	28	12
Sand + gravel w/ clay lense		28	40	12
Total				40

Temporary Dewatering wells on this parcel

JUL 27 2010

8. WELL CONSTRUCTION
Depth Drilled **40** Feet Depth Cased **40** Feet

HOLE DIAMETER (BIT SIZE)

From	To	From	To
32 Inches	0 Feet	28	Feet
24 Inches	28 Feet	40	Feet

CASING SCHEDULE

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

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

From _____ feet to _____ feet
From _____ feet to _____ feet
From **10** feet to **40** feet
From _____ feet to _____ feet
From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
Depth of Seal _____ Neat Cement
Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
From **0** feet to **40** feet

9. WATER LEVEL
Static water level **12** feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

Date started **6-28** 19**90**
Date completed **7-10** 19**90**

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 **Griffin Dewatering Corp** Contractor
Address **536 E Midland** Contractor
Ontario CA

Nevada contractor's license number issued by the State Contractor's Board **0031246**
Nevada driller's license number issued by the Division of Water Resources, the on-site driller **M 1968**

Signed **[Signature]**
By driller performing actual drilling on site or contractor
Date **7-15-00**