

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

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 543 B Lake Shore Drive
 MAILING ADDRESS L.V. NV

2. LOCATION 1/4 NW 1/4 Sec 23 T. 22 N. R. 64 E Clark County
 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 RMC
 Municipal/Industrial Monitor Stock Air Other Bucket

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Sandy Dirt w/ cobbles & some boulders</u>		<u>0</u>	<u>16</u>	<u>16</u>
<u>Med-Coarse Sand + GRAVEL</u>		<u>16</u>	<u>28</u>	<u>12</u>
<u>Sand + GRAVEL w/ clay lense</u>		<u>28</u>	<u>40</u>	<u>12</u>
<u>Total 26 10</u>				
<u>Temporary Dewatering wells on this Parcel</u>				

8. WELL CONSTRUCTION
 Depth Drilled 40 Feet Depth Cased 40 Feet
 HOLE DIAMETER (BIT SIZE)
 From 32 Inches 0 Feet 28 Feet
 To 24 Inches 28 Feet 40 Feet
 Inches _____ Feet _____ Feet

CASING SCHEDULE

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

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:
 Neat Cement
 Cement Grout
 Concrete Grout
 Depth of Seal _____
 Placement Method: Pumped Poured
 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 1980
 Date completed 7-10 1980

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
 Address 536 E Midland
Ontario CA
 Nevada contractor's license number 0031246
 issued by the State Contractor's Board
 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 7-15-80