WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

STATE OF NEVADA
DIVISION OF WATER RESOURCES

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

OFFICE USE ONLY
Log No. 80673
Permit No.
Basin 212

NOTICE OF INTENT NO. 20669

1. OWNER: CLARK COUNTY SANITATION DISTRICT
MAILING ADDRESS: 5857 E. FLAMINGO RD.
LAS VEGAS, NV 89122

ADDRESS AT WELL LOCATION: 5857 E. FLAMINGO RD.
LAS VEGAS, NV. 89122
(SLETTEN CONSTRUCTION)

2. LOCATION ___ ¼ ___ ¼ Sec. 22 T. 21 N/S R. 62 E. CLARK County
PERMIT NO. DW-1117 (Issued by Water Resources) | 161-22-101-001 (Parcel No.) | CCSD FILTER PROJECT #377 (Subdivision Name)

3. WORK PERFORMED
☐ New Well ☐ Replace ☐ Recondition
☐ Deepen: ☐ Abandon ☒ Other: Dewater

4. PROPOSED USE: Temp DEWATER
☐ Domestic ☐ Irrigation ☐ Test
☒ Municipal/Industrial ☐ Monitor ☐ Stock

WELL TYPE
☐ Cable ☐ Rotary ☐ RVC
☐ Air ☐ Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Section 3-Dewater wells				
Well #1-10, 12-19				
Silt		0	8'	8'
Silt	x	8'	12'	4'
Silt	xx	12'	35'	23'
Silt/Clay	x	35'	55'	20'

Date started 7/10 2000
Date completed 7/28 2000

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

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

8. WELL CONSTRUCTION
Depth Drilled 55' Feet Depth Cased 55' Feet

HOLE DIAMETER (BIT SIZE)

		From	To
24" Inches		0 Feet	55 Feet
Inches		Feet	Feet
Inches		Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
	36.71	0250	0	55

Perforations:
Type perforation: Machine
Size perforation: 1/4 X 2 1/2X
From 0 feet to 55 feet
From ___ feet to ___ feet
From ___ feet to ___ feet
From ___ feet to ___ feet
From ___ feet to ___ feet

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

Gravel Packed: ☒ Yes ☐ No
From 0 feet to 55' feet

9. WATER LEVEL
Static water level ___ 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: ALLEN DRILLING INC. (Contractor)
Address: 4847 S. VALLEY VIEW (Contractor)
LAS VEGAS, NV 89103

Nevada contractor's license number issued by the State Contractor's Board: 18917
Nevada driller's license number issued by the Division of Water Resources, the on-site driller: ABDS2161
Signed: ___ (By driller performing actual drilling on site or contractor)
Date: 8/2/00

(Rev. 3-91) USE ADDITIONAL SHEETS IF NECESSARY (O)-637