

OFFICE USE ONLY
 Log No. 80767
 Permit No. _____
 Basin 212

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. 20678

1. OWNER HOME DEPOT USA INC. ADDRESS AT WELL LOCATION 5991 S. PECOS RD
3800 W. CHAPMAN AVE LAS VEGAS, NV
ORANGE, CA 92868

2. LOCATION SE NE 36 21 N/S R 61. E CLARK County
R-1039 1/4 162-36-T 601-020
 PERMIT NO. Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other

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	Thickness
Abandon 2 wells				
#1 Perforate stopped at 65' on obstruction.				
Well depth 127'				
Perforated up to 49' and Filled with 3 1/4 yard 27 sac cement slurry via trimmie to well bottom.				
Static level at 14'				
#2 Perforation necessary due to hammering of drill pipe against casing.				
Filled with 2 yards 27 sac cement slurry via trimmie to well bottom. 111' Depth				
Static level at 14'				

8. WELL CONSTRUCTION
 Depth Drilled 111 Feet Depth Cased _____ 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)

Perforations:
 Type perforation _____
 Size perforation _____
 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 _____ 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 August 1
 Date completed August 2

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 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 1301

Signed Fred S. Allen
 By driller performing actual drilling on site or contractor
 Date 8/22/10



X

