

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. 44795

1. OWNER Nellis Air Force Base ADDRESS AT WELL LOCATION Nellis A.F.B. Range
MAILING ADDRESS 5179 Malmstrom Ave. Complex
Nellis A.F.B. NV 89191

2. LOCATION S 42 1/4 NE 1/4 Sec. 9 T 14 S N/S R 56 E Clark County

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
Sand	NO	0	4	4
Loose Gravel 2 1/2" minus	NO	4	200	196
Hard Grey Rock	NO	200	230	30
Grey Rock + Clay	NO	230	270	40
Black Rock - Shale	NO	270	273	3
Grey, Brown, Black Rock	NO	273	285	12
Rock + Clay	NO	285	290	5
Black Rock	NO	290	295	5
Grey Rock	NO	295	298	3
Black Rock	NO	298	315	17
Grey Rock	NO	315	325	10
Grey Rock + Clay	NO	325	370	45
Brown Rock + Clay	NO	370	373	3
Grey Rock	NO	373	374	1
Clay - Brown	NO	374	376	2
Black Rock + Clay	NO	376	380	4
Grey + Brown Rock	NO	380	385	5
Grey Rock	NO	385	412	27
Grey + Brown Rock + Clay	NO	412	416	4
Grey Rock + Clay	NO	416	420	4
Grey Rock	NO	420	450	30
Grey Rock + Clay	NO	450	470	20
Black Rock	NO	470	474	4
Grey Rock	NO	474	475	1
Black Rock	NO	475	490	15
Clay + Black Rock	NO	490	495	5
Black Rock	NO	495	498	3
Grey Rock	NO	498	500	2
Grey Rock + Clay	NO	500	506	6

8. WELL CONSTRUCTION

Depth Drilled _____ Feet Depth Cased _____ Feet

HOLE DIAMETER (BIT SIZE)

	From	To
12 1/4 Inches	0	20'
20 6 Inches	20'	1530'

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
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 _____ feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

Date started 27 June 2001
Date completed _____, 19____

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input checked="" type="checkbox"/> Pump <input type="checkbox"/> Air Lift			

Stamp: RECEIVED 18 2001 LAS VEGAS OFFICE

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name US Air Force Contractor
Address 5179 Malmstrom Ave
Nellis AFB, NV 89191 Contractor

Nevada contractor's license number FP 2162
issued by the State Contractor's Board.

Nevada driller's license number issued by the Division of Water Resources, the on-site driller FP 2162

Signed _____
By driller performing actual drilling on site or contractor

Date 27 Aug 01

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1. OWNER _____ ADDRESS AT WELL LOCATION _____
 MAILING ADDRESS _____

2. LOCATION _____ 1/4 _____ 1/4 Sec _____ T. _____ N/S R. _____ E. _____ County _____
 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	Thick-ness
Black Rock + Clay		1015	1090	75
Black - Brown Rock + Clay		1090	1120	30
Grey Rock		1120	1170	50
Grey Rock + White Clay		1170	1230	60
Grey Clay + Rock		1230	1235	5
Grey Rock + Clay		1235	1240	5
Black Rock + Clay		1240	1270	30
Black Rock + Red Clay		1270	1280	10
Red Clay + Rock		1280	1283	3
Rock + Clay		1283	1290	7
Red Clay + Rock		1290	1299	9
Black Rock		1299	1375	76
Red + Grey Clay + Black Rock		1375	1430	55
Rock		1430	1450	20
Black Rock		1450	1470	20
Black Rock + Clay		1470	1490	20
Rock		1490	1520	30
Black Rock + Grey Clay		1520	1530	10
		1530		

8. WELL CONSTRUCTION
 Depth Drilled _____ 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 _____ 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 _____ Contractor _____
 Address _____ Contractor _____

Nevada contractor's license number issued by the State Contractor's Board _____
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller. FR-2162
 Signed _____
 By driller performing actual drilling on site or contractor
 Date _____

Date started _____, 19____
 Date completed _____, 19____

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

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 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	Thick-ness
Clay + Rock		506	510	4
Grey Rock + Clay		510	540	30
Black rock		540	544	4
Black + Gray Rock		544	550	6
Grey Rock		550	557	7
Loose Brown Rock		557	559	2
Black Rock		559	567	8
Brown Rock - Crystal		567	573	6
Black Rock - Crystal		573	580	7
Grey + Black Rock + Crystal		580	590	10
Grey Rock + Crystal		590	593	3
Grey Rock		593	607	14
Lt. Brown Rock		607	620	13
Grey Rock		620	627	7
Grey Rock + Clay		627	640	13
Clay + Grey Rock		640	644	4
Grey Rock + Clay		644	662	18
Grey Rock		662	677	15
Grey Rock + Clay		677	687	10
Grey Rock		687	730	43
Grey Rock + Clay		730	770	40
Lt. Grey Rock		770	800	30
Lt. Grey Rock + Clay		800	830	30
Lt. Grey Rock		830	905	75
Clay + Grey Rock		905	910	5
Lt. Grey Rock		910	930	20
Clay + Lt. Grey Rock		930	937	7
Grey Rock + Clay		937	960	23
Clay + Grey Rock		960	1015	55

8. WELL CONSTRUCTION
 Depth Drilled _____ 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

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 Contractor _____
 Address _____
 Contractor _____

Nevada contractor's license number _____
 issued by the State Contractor's Board _____
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller FP-2162
 Signed _____
 By driller performing actual drilling on site or contractor
 Date _____

Date started _____, 19 _____
 Date completed _____, 19 _____

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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