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. 84847
Permit No.
Basin 212

NOTICE OF INTENT NO. 21232

1. OWNER US Airforce
MAILING ADDRESS 4349 Duffer Drive Suite 1601 Nellis AFB
ADDRESS AT WELL LOCATION Nellis AFB

2. LOCATION NE ¼ NE ¼ Sec 4 T 20 N/S R 62 E Clark County
PERMIT NO. (Issued by Water Resources) 140.04.501.001 (Parcel No.) Subdivision Name

3. WORK PERFORMED 7 wells
☐ 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 Auger

6. LITHOLOGIC LOG

| Material | Water Strata | From | To | Thickness |
|---|---|---|---|---|
| Drill over 7 2" | | | | |
| Well Pull Well | | | | |
| Casing Run Trimite | | | | |
| Pipe to Bottom | | | | |
| of Hole pump | | | | |
| Neat Cement | | | | |
| to Surface with | | | | |
| Grout pump | | | | |
| 7 Wells Complete | | | | |

Date started 3-19, 2001
Date completed 3-24, 2001

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 ____ 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
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 ____ 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 Layne Christensen Co. (Contractor)
Address 12030 E Riggs Rd Chandler Az. 85249 (Contractor)
Nevada contractor's license number issued by the State Contractor's Board 0019101
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2021
Signed Michael J. Wells (By driller performing actual drilling on site or contractor)
Date 3-24-2001

(Rev. 3-91)

USE ADDITIONAL SHEETS IF NECESSARY

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