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. 856607
Permit No.
Basin 163

NOTICE OF INTENT NO. 22740

1. OWNER DELCO CONCRETE PRODUCTS
MAILING ADDRESS 4625 WYNN RD. #219
LAS VEGAS, NV. 89103

ADDRESS AT WELL LOCATION SANDY VALLEY RD. & BOSS MINE RD.
SANDY VALLEY NV.

2. LOCATION SE ¼ SW ¼ Sec. 27 T. 24 N R. 57 E. CLARK County

PERMIT NO. (Issued by Water Resources) | Parcel No. 201-27-000-001 | 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
PERFORATE WELL CASING		680	400 FT.	
6" P.V.C. - MILLS				
KNIFE - ½ INCH BY				
3 INCH CUT.				
PUMP CEMENT 27 SK NEAT		776 - 133 FT.		
6 YDS.				
POURED ALL 1 YD. CONCRETE		133 - SURFACE		
GROUT				

DCNR/DWR
RECEIVED
MAR 25 2002
LAS VEGAS OFFICE

Date started 3-9 2002
Date completed 3-9 2002

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 BUDGET DRILLING CO. (Contractor)
Address P.O. BOX 3505 PAHRUMP NV. 89041 (Contractor)
Nevada contractor's license number issued by the State Contractor's Board 40020
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1573
Signed ____ (By driller performing actual drilling on site or contractor)
Date 3-18-2002

(Rev. 3-91) USE ADDITIONAL SHEETS IF NECESSARY (O)-627