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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. 23207

1. OWNER LANGSTON, RICHARD & FRANCES P ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS 4444 W. SUNSET RD PARADISE  
LAS VEGAS NV 89118  
 2. LOCATION SE 1/4 SW 1/4 Sec. 31 T. 21 62 E CLARK County  
 PERMIT NO. 162-31-401-017  
 Issued by Water Resources Parcel No. \_\_\_\_\_ Subdivision Name \_\_\_\_\_

3. WORK PERFORMED  
 New Well  ~~Recondition~~  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
<u>Bore Well To 276'</u>				
<u>PERFORATE FROM 276' TO 176'</u>				
<u>PUMP 7 YARDS NEAT CEMENT FROM BOTTOM TO SURFACE</u>				
<u>CUT CASING @ 5' AND BACKFILL</u>				

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/Fr. (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:  
 Depth of Seal \_\_\_\_\_  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  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 \_\_\_\_\_

Date started 5-15-02, 19\_\_\_\_\_  
 Date completed 5-22-02, 19\_\_\_\_\_

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 B.L. WIEGER GROUP INC Contractor  
 Address 4145 ARCTIC SPRING AVE Contractor  
LAS VEGAS NV 89115  
 Nevada contractor's license number 035039  
 issued by the State Contractor's Board  
 Nevada driller's license number issued by the 2024-T2  
 Division of Water Resources, the on-site driller.  
 Signed Allan L. Hoagland  
 By driller performing actual drilling on site or contractor  
 Date 6-2-02



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