

OFFICE USE ONLY
 Log No. 87901
 Permit No. 1
 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. **23108**
1776 E. OGDEN AVE.

1. OWNER **CLARK COUNTY SCHOOL DISTRICT**
 MAILING ADDRESS **4828 PEARL STREET**
LAS VEGAS, NV 89121
 ADDRESS AT WELL LOCATION **LAS VEGAS, NV (HOLLINGWORTH ES)**

2. LOCATION **SE NE 35 20** 1/4 Sec. **139-35-710-001** N/S R. **61** E. **CLARK** County

PERMIT NO. **DW1150** Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition Deepen Abandon Other **Dewater**

4. PROPOSED USE **Dewater** WELL TYPE
 Domestic Irrigation Test Cable Rotary RVC
 Municipal/Industrial Monitor Stock Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
26-30' Dewater wells				
TOP SOIL		0	5	
CALICHE		5	6	
BROWN CLAY/ROCK		6	30	

8. WELL CONSTRUCTION
 Depth Drilled **30'** Feet Depth Cased **30'** Feet

HOLE DIAMETER (BIT SIZE)
 From **24"** Inches To **0** Feet **30** Feet
 Inches Feet Feet
 Inches Feet Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
14	36.71	1.250	0	30

Perforations: **Machine Perforate**
 Type perforation **1/4" x 2 1/2" x 3 rows @ 13'**
 Size perforation **10** feet to **30** feet
 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 Pack: Yes No **30**
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level _____ feet below land surface
 Artesian flow **11'** G.P.M. **1** 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 **ALLEN DRILLING INC.**
 Address **4847 S. VALLEY VIEW**
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 T-1**
 Signed *[Signature]*
 By driller performing actual drilling on site or contractor
 Date **10/3/02**

Date started **8/21/02**, 20____
 Date completed **9/3/02**, 20____

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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