WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

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

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

3 wells

OFFICE USE ONLY
Log No. 89801
Permit No.
Basin 212

NOTICE OF INTENT NO. 24879

1. OWNER B. Patel 2083 E. Fremont
MAILING ADDRESS 2083 E. Freemont St. Las Vegas, NV
ADDRESS AT WELL LOCATION 2083 E. Freemont Las Vegas, NV

2. LOCATION SW ¼ SE ¼ Sec. 35 T. 20 N/S R. 61 E. Clark County
PERMIT NO. (Issued by Water Resources) 139-35-802-007 (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 |
|---|---|---|---|---|
| Removed Vaults | | | | |
| Removed Casing | | 0 | 10 | |
| Pumped Neat Cement | | | | |
| Surface Completion with concrete | | | | |

Date started 3-21, 2003
Date complated 3-21, 2003

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)

| Inches | From Feet | To 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 Eagle Drilling Services (Contractor)
Address 7150 Placid Las Vegas (Contractor)
Nevada
Nevada contractor's license number issued by the State Contractor's Board 51266
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2193
Signed (By driller performing actual drilling on site or contractor)
Date 06/30/03

(Rev. 12-01)

USE ADDITIONAL SHEETS IF NECESSARY

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