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. 90038
Permit No.
Basin 212

R-1196
NOTICE OF INTENT NO. 25208

1. OWNER Hunt, Lorraine T
MAILING ADDRESS 3653 N. Rosecrest Cir
Las Vegas NV 89121

ADDRESS AT WELL LOCATION 8461 Giles St
Enterprise

2. LOCATION SW ¼ NW ¼ Sec. 16 T. 22 N/S R. 61 E. Clark County

PERMIT NO. (Issued by Water Resources) 177-16-201-009 (Parcel No.) (Subdivision Name)

3. WORK PERFORMED
☐ New Well ☐ Replace ☐ Recondition
☐ Deepen ☒ Abandon ☒ Other PLUG

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
Bailed Well To 150'				
Pump 6 yards Of Neat Cement				
From Bottom To Surface				
Cut Casing @ 5' And Backfill				

DCNR/DWR
RECEIVED
JUL 29 2003
LAS VEGAS OFFICE

Date started 7-2, 2003
Date complated 7-11, 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)
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 B.L. Weber Group Inc
Contractor
Address 4145 Arctic Spring
Contractor
Las Vegas NV 89115

Nevada contractor's license number issued by the State Contractor's Board 035639

Nevada driller's license number issued by the Division of Water Resources, the on-site driller RP Ltd 2220

Signed Allan L Hodgkins
By driller performing actual drilling on site or contractor

Date 7-28-03

(Rev. 12-01) USE ADDITIONAL SHEETS IF NECESSARY (O)-627