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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. 24288
24293

1. OWNER Southern Nevada Water Authority ADDRESS AT WELL LOCATION 1.5 miles south of
MAILING ADDRESS Resource Dept. MS#100 S.R. 168 in deadman wash
1900 E. Flamingo Rd., Suite #180

2. LOCATION NW 1/4 SE 1/4 Sec. 33 T. 13 1/2 R. 64 E Clark County
 PERMIT NO. 274-00-0-002-001 Issued by Water Resources 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	Thick-ness
Alluvium - silt, clay fine sand w/pebble size gravel		0	70	70
Carbonate - coarse limestone and dolomite		70	120	50
medium grained limestone and dolomite		120	190	70
fine grained limestone with calcite veining		190	320	140
detrital-quartz sandstone		320	360	40
fine grained limestone	382'	360	1020	660
fine grained dolomite		1020	1230	210
dolomite, limestone		1230	1785	555

8. WELL CONSTRUCTION
 Depth Drilled 1,785 Feet Depth Cased 1,780 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
<u>13.75</u> Inches	<u>0</u> Feet	<u>1060</u> Feet
<u>7 7/8</u> Inches	<u>1060</u> Feet	<u>1785</u> Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4.5</u>	<u>15</u>	<u>Sch 80</u>	<u>+2</u>	<u>1780</u>
<u>8 5/8</u>	<u>22.38</u>	<u>1/4</u>	<u>0</u>	<u>1060</u>

Perforations:
 Type perforation factory slot
 Size perforation .100 x 6 x 12 x 2-1/2
 From 960 feet to 1760 feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Depth of Seal 1,060' Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout

Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level 240 feet below land surface
 Artesian flow _____ G.P.M. P.S.F.
 Water temperature 78 °F Quality good, clear

Date started 5/27, 1903
 Date completed 6/17, 1903

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 checked="" type="checkbox"/> Air Lift	<u>100+</u>		<u>2</u>

10. DRILLER'S CERTIFICATION
 This well was drilled under my supervision and the report is true to the best of my knowledge.
 Name Eklund Drilling Company, Inc. Contractor
 Address P.O. Box 2748 Contractor
Elko, Nevada 89803
 Nevada contractor's license number 0030823
 issued by the State Contractor's Board
 Nevada driller's license number issued by the M1819
 Division of Water Resources, the on-site driller
 Signed My Sonst
 By driller performing actual drilling on site or contractor
 Date 7/8/2003