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. 90144
Permit No.
Basin 212

NOTICE OF INTENT NO. 25016

1. OWNER Gauvin, Andre + Monique Family Trust
MAILING ADDRESS 2516 Lacomb
Las Vegas NV 89121
ADDRESS AT WELL LOCATION 200' NW of Intersection of Giles + Shelbourne - Entrance

2. LOCATION NW ¼ NW ¼ Sec. 16 T. 22 N/S R. 61 E. Clark County
PERMIT NO. Luc 59184 Issued by Water Resources
177-16-101-021 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
Ball To Bottom @ 159'				
Perforate From 157' To 90'				
Pump 4 yards Neat Cement From Bottom To Surface				
Cut Casing @ 5' And Backfill				

DCNR/DWR
RECEIVED
AUG 2 2 2003
LAS VEGAS OFFICE

Date started 4-10, 2003
Date completed 8-5, 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)

PLUGGED BY GWMP
ORIG/PLUG LOG # 59184

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 156' 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 R+P Lic 2220
Signed [signature] (By driller performing actual drilling on site or contractor)
Date 8-23-03

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