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

OFFICE USE ONLY
Log No. 91024
Permit No. 55051
Basin 212

NOTICE OF INTENT NO. 25184

1. OWNER Paypath Young J TRS
MAILING ADDRESS 6030 Montessouri St.
Las Vegas NV. 89113-0254

ADDRESS AT WELL LOCATION 6030 Montessouri St.
Las Vegas NV. 89113

2. LOCATION SE ¼ NE ¼ Sec. 34 T. 21 N/S R. 60 E. Clark County
PERMIT NO. Log # 51287 Issued by Water Resources
163-34-601-014 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
Sounded bottom to 505'				
Perforated from 505' to 294'				
Pumped 10 yds heat cement from bottom to surface.				
Cut casing @ slab				

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RECEIVED
OCT 24 2003
LAS VEGAS OFFICE

Date started 9-8-03, 20
Date completed 9-16-03, 20

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 347 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 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 Ltd. 2248
Signed [signature] By driller performing actual drilling on site or contractor
Date 10-23-03

(Rev. 12-01)

USE ADDITIONAL SHEETS IF NECESSARY

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