#21

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. 91156
Permit No.
Basin 212

NOTICE OF INTENT NO. 25799

1. OWNER William Purington
MAILING ADDRESS 4741 Linda Ave
Las Vegas Nv. 89121-7116
ADDRESS AT WELL LOCATION Same

2. LOCATION SW ¼ SE ¼ Sec. 08 T. 21 N/S R. 62 E. Clark County
PERMIT NO. No Log (Issued by Water Resources) | 161-08-810-043 (Parcel No.) | Subdivision Name

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

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
pulled pipe, pump & Cable 110'				
Sounded Bottom @ 134'				
Bailed to 150'				
perforated from 150' to 50'				
pumped 3 1/2 Neat Cement from Bottom to Surface				
Cut casing 5' Below and Back filled				

Date started October 30, 2003
Date completed November 7, 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

PLUGGED BY GWMP
ORIG/ PLUG LOG # Unknown

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 17 ft. 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 Lic. 2248
Signed [signature] (By driller performing actual drilling on site or contractor)
Date 11-18-03

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

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