

91194  
 OFFICE USE ONLY  
 Log No. 91194  
 Permit No. 212  
 Basin 212

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

**WELL DRILLER'S REPORT**  
 Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

25286  
 NOTICE OF INTENT NO. 4150 S HOLLYWOOD BLVD

1. OWNER **CLARK COUNTY SANITATION DISTRICT** ADDRESS AT WELL LOCATION **LAS VEGAS, NV**  
 MAILING ADDRESS **3837 E. FLAMINGO RD. LAS VEGAS, NV 89122**  
 2. LOCATION **NW 1/4 NW 1/4 Sec. 23 T. 21 N/S R. 62 E. CLARK** County  
 PERMIT NO. **DW-1169** Parcel No. **161-23-101-001** Subdivision Name **Tradwest Construction**

3. WORK PERFORMED  
 New Well  Replace  Recondition  Deepen  Abandon  Other **DEWATER**  
 4. PROPOSED USE **Dewater**  
 Domestic  Irrigation  Test  Monitor  Stock  
 Municipal/Industrial  Air  Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<b>14-Dewater wells</b>				
<b>Sandy Clay</b>		0	8'	8'
<b>Silt</b>	X	8'	12'	4'
<b>Silt/Gray clay</b>	XX	12'	30'	23'

8. WELL CONSTRUCTION  
 Depth Drilled **30'** Feet Depth Cased **30'** Feet  
 HOLE DIAMETER (BIT SIZE)  
 From \_\_\_\_\_ To \_\_\_\_\_  
**24"** Inches \_\_\_\_\_ Feet **30'** Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
	<b>36.71</b>	<b>0.250</b>	<b>0</b>	<b>30</b>

Perforations: **Machine**  
 Type perforation \_\_\_\_\_  
 Size perforation **1/4 x 2 1/2x**  
 From **0** feet to **30** feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Neat Cement  
 Cement Grout  
 Concrete Grout  
 Placement Method:  Pumped  Poured  
 Gravel Packed:  Yes  No  
 From **0** feet to **30** feet

9. WATER LEVEL  
 Static water level **18'** feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started **9/29/03**, 20\_\_\_\_  
 Date completed **10/3/03**, 20\_\_\_\_

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 type="checkbox"/> Air Lift			

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name **ALLEN DRILLING INC.** Contractor  
 Address **4347 West Tompkins Ave. LAS VEGAS, NV 89103** Contractor  
 Nevada contractor's license number issued by the State Contractor's Board **18917**  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1301**  
 Signed *Allen D. Allen Jr.*  
 By driller performing actual drilling on site or contractor  
 Date **10/16/03**