

OFFICE USE ONLY
 Log No. 91220
 Permit No. _____
 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

NOTICE OF INTENT NO. 24963

1. OWNER CLARK COUNTY SANITATION ADDRESS AT WELL LOCATION 5857 E FLAMINGO RD
 MAILING ADDRESS 5857 E FLAMINGO RD LAS VEGAS, NV
LAS VEGAS, NV 89122-5307

2. LOCATION SW 1/4 SW 1/4 Sec. 15 T. 21 N/S R. 62 E CLARK County
 PERMIT NO. DW1163 161-15-401-002 WESTERN SUMMIT Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other DEWATER

4. PROPOSED USE Dewater
 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
SILT		0	8	8
SANDY SILT		8	30	22
18-DEWATER WELLS				
DON'D WMP RECEIVED SEP 27 2003 LAS VEGAS OFFICE				

8. WELL CONSTRUCTION
 Depth Drilled 30 Feet Depth Cased 30 Feet

HOLE DIAMETER (BIT SIZE)
 From 12 Inches To 30 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
14		1/4	0	30

Perforations: **MACHINE**
 Type perforation 1/8 x 3"
 Size perforation _____

From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Depth of Seal _____
 Placement Method: Pumped Poured
 Poured

Gravel Packed: Yes No
 From 0 feet to 30 feet

9. WATER LEVEL
 Static water level 8 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.
ALLEN DRILLING INC.
 Name _____ Contractor
 Address 4015 WEST TOMPKINS AVE Contractor
LAS VEGAS, NV 89103

Nevada contractor's license number 18917
 issued by the State Contractor's Board

Nevada driller's license number issued by the 1301
 Division of Water Resources, the on-site driller

Signed Allen B. Allen
 By driller performing actual drilling on site or contractor
 Date 9/22/03

Date started 8/26/03 20
 Date completed 9/5/03 20

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)