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. 91463
Permit No.
Basin 212

25472

NOTICE OF INTENT NO.

1. OWNER CITY OF HENDERSON
MAILING ADDRESS PO BOX 2095 HENDERSON, NV 89009
ADDRESS AT WELL LOCATION 2400 MOSER DR. HENDERSON, NV

2. LOCATION N ¼ SE ¼ Sec 36 T 21 S R 62 E CLARK County
PERMIT NO. Issued by Water Resources | Parcel No. 161-36-701-001 | Subdivision Name

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

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	Thickness
Plug 7-24" dewater wells				
Depth 40'				
Pulled 5 casings				
cement 2 casings in ground				
no access to drill out.				
Placed 2 yards of 4000 GRT				
9 sack cement grout in each.				

LCNB DWR
RECEIVED
DEC 1 2003
LAS VEGAS OFFICE

Date started 10/17/03, 20
Date completed 10/19/03, 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 ____ 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 ALLEN DRILLING INC. (Contractor)
Address 4015 WEST TOMPKINS (Contractor)
LAS VEGAS, NV 89103
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 ____ (By driller performing actual drilling on site or contractor)
Date 11/19/03

(Rev 12-01)

USE ADDITIONAL SHEETS IF NECESSARY

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