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. 94866
Permit No.
Basin 212

NOTICE OF INTENT NO. 27447

1. OWNER Larry Sr. & Susan Smith Trust
MAILING ADDRESS 8044 Placid St.
ADDRESS AT WELL LOCATION 8044 Placid St.

2. LOCATION SE ¼ SE ¼ Sec. 9 T. 22 N/S R. 61 E. CLARK County
PERMIT NO. Log # 58812 (Issued by Water Resources) | 177-09-803-012 (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 273 ft.				
Casing to 164'				
perforated 164' to 67'				
pumped 6 yo Neat cement from bottom to surface				
Remove cement pad. cut casing 3' below surface backfilled.				

DCNR/DWR
RECEIVED
NOV 22 2004
LAS VEGAS OFFICE

Date started November 16, 2004
Date completed November 19, 2004

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 117 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 WDC Exploration + Wells (Contractor)
Address 570 Corinthian Way (Contractor)
N. Las Vegas Nv. 89030
Nevada contractor's license number issued by the State Contractor's Board 0012852
Nevada driller's license number issued by the Division of Water Resources, the on-site driller RAP 2248 LTD
Signed (By driller performing actual drilling on site or contractor)
Date November 22, 2004

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