

OFFICE USE ONLY  
Log No. **96107**  
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

NOTICE OF INTENT NO. **27478**

1. OWNER **Ralph Jr. Freedman** ADDRESS AT WELL LOCATION **SAME**  
MAILING ADDRESS **2215 Red Rock St. Las Vegas NV 89146**  
2. LOCATION **SW 1/4 SW 1/4 Sec 01 T 21 N/S R 60 E CLARK** County  
PERMIT NO. **1163-01-401-004** Issued by Water Resources 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	Thick-ness
<b>NO. pump</b>				
<b>Sanded bottom @ 300'</b>				
<b>perforated from PLUSSING OF 300' to 176'</b>				
<b>log #55220</b>				
<b>RAN terminus line down to 300'</b>				
<b>pump 6 yds of neat cement from bottom to surface</b>				
<b>cut casing flush w/ ground</b>				
<b>DCNR/DWR RECEIVED</b>				
<b>APR 28 2005</b>				
<b>LAS VEGAS OFFICE</b>				

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

Surface Seal:  Yes  No Seal Type:  
Depth of Seal \_\_\_\_\_  Neat Cement  
Placement Method:  Pumped  Concrete Grout  
 Poured  
Gravel Packed:  Yes  No  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Date started **Feb 28** 20**05**  
Date completed **April 27** 20**05**

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			

9. WATER LEVEL  
Static water level **226'** 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 **W & D C Exploration & wells** Contractor  
Address **570 Corinthian way** Contractor  
**No. 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 **2248 L.T.D.**  
Signed **George Abraham**  
By Driller performing actual drilling on site or contractor  
Date **April 28, 2005**