

3-4" WELLS

WHITE-DIVISION OF WATER RESOURCES
CANARY-CLIENT'S COPY
PINK-WELL DRILLER'S COPY

STATE OF NEVADA
DIVISION OF WATER RESOURCES

OFFICE USE ONLY
Log No. 96361
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. 27038

1. OWNER BRUCE GARNETT
MAILING ADDRESS 4455 S PECOS
LV, NV 89101
2. LOCATION NW 1/4 SW 1/4 Sec. 34 T. 20 N. R. 61 E. CLARK County
PERMIT NO. 13434310020 Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other
4. PROPOSED USE
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock
5. WELL TYPE
 Cable Rotary PVC
 Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
SAND/GRAVEL		0'	6	6
CALICHE		6	17	11
CLAY/GRAVEL		18	25	7

UNRECEIVED
MAY 11 2005
LAS VEGAS OFFICE

8. WELL CONSTRUCTION
Depth Drilled 25 Feet Depth Cased 25 Feet
HOLE DIAMETER (BIT SIZE)
8" Inches From 0 Feet To 25 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4		SCH 40	0	25

Perforations:
Type perforation SLIT
Size perforation 02-0
From 10 feet to 25 feet

Surface Seal: Yes No Seal Type:
Depth of Seal 8 Neat Cement
Placement Method: Pumped Poured Cement Grout Concrete Grout
Gravel Packed: Yes No
From 8 feet to 25 feet

9. WATER LEVEL
Static water level 18 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 TENN Contractor
Address 1913 N. NELLIS BX 303 Contractor
LV, NV 89115
Nevada contractor's license number issued by the State Contractor's Board 55860
Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-1953
Signed [Signature] By driller performing actual drilling on site or contractor
Date 4-21-05

Date started 3-20-05
Date completed 3-23-05

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			