COPIES TO
- DIVISION OF WATER RESOURCES
- CLIENT'S COPY
- WELL DRILLER'S COPY

PRINT OR TYPE ONLY

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. 97594
Permit No.
Basin 212

NOTICE OF INTENT NO. 29400

1. OWNER CITY OF LAS VEGAS
MAILING ADDRESS 400 E STEWART
LAS VEGAS, NV 89101

ADDRESS AT WELL LOCATION 850 N. PECOS RD
LAS VEGAS, NV

2. LOCATION N ¼ SE ¼ Sec 25 T 20 S R 61 E CLARK County

PERMIT NO. DW1198 (Issued by Water Resources) | 139-25-701-002 (Parcel No.) | FREEDOM PARK (Subdivision Name)

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

4. PROPOSED USE Dewater-DOD
☐ 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 3-dewatering wells				
Depth 30'				
Pull & Drilled out casings				
Trimmie 2 yards of 9 sack				
cement grout into each				
well.				

DCNR/DWR
RECEIVED
SEP 15 2005
LAS VEGAS OFFICE

Date started 7/26, 20 05
Date completed 7/26, 20 05

7. WELL TEST DATE

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	
24	Inches	0	Feet	30	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 Seal Type:
Depth of Seal ☐ Neat Cement
Placement Method: ☐ Pumped ☐ Cement Grout
☐ Poured ☐ Concrete Grout
Gravel Packed: ☒ Yes ☐ No
From 0 feet to 30 feet

9. WATER LEVEL
Static water level 11 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 AVE. (CONTRACTOR)
LAS VEGAS, NV 89103
Nevada contractor's license number issued by the State Contractor's Board 18916 & 18917
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1301
Signed [signature] By driller performing actual drilling on site or contractor
Date 8/26/05

(Rev 12/01) USE ADDITIONAL SHEETS IF NECESSARY

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