

50 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. 98499
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. 28834

1. OWNER: Nellis AFB ADDRESS AT WELL LOCATION: NELLIS AIR FORCE BASE BUILDING 60937
 MAILING ADDRESS: 99TH CES/CEV
4349 OLLIVER DRIVE, NELLIS AFB, NV 89191

2. LOCATION: NW 1/4 SW 1/4 Sec. 10 T. 20 N. R. 62 E CLARK County
 PERMIT NO. R-1306 140-10-301-001 Subdivision Name _____
Issued by Water Resources Parcel No.

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 RVC
 Air Other _____

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
ABANDONMENT CONSISTS OF (50) WELLS				
WELLS ARE 1 1/4 GALVANIZED PIPE.				
① Pump near cement from bottom to top of wells.				
② Dig down and remove top 3' of casing per R-1306				
DOWNDROP RECEIVED				
DEC 23 2005				
LAS VEGAS OFFICE				

8. WELL CONSTRUCTION

Depth Drilled _____ Feet Depth Cased _____ Feet

HOLE DIAMETER (BIT SIZE)

Inches	Feet	Feet
From _____	To _____	
_____	_____	_____
_____	_____	_____
_____	_____	_____

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

Surface Seal: Yes No Seal Type:
 Neat Cement
 Cement Grout
 Concrete Grout

Depth of Seal _____

Placement Method: Pumped
 Poured

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 _____

Date started: 12-13 2005
 Date completed: 12-15 2005

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name: WDC EXPLOSION & WELLS Contractor
 Address: 570 CANTON WAY N. LAS VEGAS, NV Contractor
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: 2202

Signed: _____
 By driller performing actual drilling on site or contractor

Date: 12-22-05