

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. 98525
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 Outer Drive, Nellis AFB, NV 89191
 2. LOCATION NW 1/4 SW 1/4 Sec. 10 T. 20 N. 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				
CONDENSER RECEIVED				
DEC 23 2005				
LAS VEGAS OFFICE				

8. WELL CONSTRUCTION

Depth Drilled _____ Feet Depth Cased _____ Feet

HOLE DIAMETER (BIT SIZE)

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

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)

Perforations:

Type perforation _____
 Size perforation _____

From	To
_____ feet to _____ feet	_____ feet to _____ feet
_____ feet to _____ feet	_____ feet to _____ feet
_____ feet to _____ feet	_____ feet to _____ feet
_____ feet to _____ feet	_____ feet to _____ feet
_____ feet to _____ feet	_____ 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

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

7. WELL TEST DATA

TEST METHOD: Bailor Pump Air Lift

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

9. WATER LEVEL

Static water level _____ 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 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