

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. 98532  
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 OFFER 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				
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	Inches
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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

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)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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 Crockett 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