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

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

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. 98900
Permit No.
Basin 212

NOTICE OF INTENT NO. 29080

1. OWNER Story Book Homes
MAILING ADDRESS 2580 Montessouri St Ste 102 LV NV 89117

ADDRESS AT WELL LOCATION Pecos & Lake mead 3687 E Lake Mead - DSB

2. LOCATION NW ¼ SW ¼ Sec. 19 T. 20 N/S R. 62 E. Clark County

PERMIT NO. Issued by Water Resources | Parcel No. 140-19-301-012 | 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 ☐ RVC
☐ Air ☐ Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Ripped Casing From		4	150	146
Pumped With Neat Cement 4 yards				
From Bottom To Surface				
Capped off After Settling				
With Cement Grout		2 yards		

DCNR/DWR
RECEIVED
MAR 09 2006
LAS VEGAS OFFICE

Date started 3-9-06, 20
Date completed 3-9-06, 20

7. WELL TEST DATA
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
Inches	Feet	Feet
Inches	Feet	Feet
Inches	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8		10 Gal		

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
Depth of Seal
Placement Method: ☐ Pumped ☐ Poured
Seal Type: ☐ Neat Cement ☐ Cement Grout ☐ Concrete Grout

Gravel Packed: ☐ Yes ☐ No
From ____ feet to ____ feet

9. WATER LEVEL
Static water level 24 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 Redding Drilling (Contractor)
Address 530 Larson (Contractor)
Henderson NV 89044
Nevada contractor's license number issued by the State Contractor's Board 38155
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 147
Signed (By driller performing actual drilling on site or contractor)
Date 3-9-06

(Rev. 12-01) USE ADDITIONAL SHEETS IF NECESSARY (O)-627