COPIES TO
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- 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. 102583
Permit No.
Basin 212

NOTICE OF INTENT NO. 30816

1. OWNER CLARK COUNTY SANITATION
MAILING ADDRESS 5857 E FLAMINGO RD.
LAS VEGAS, NV 89122

ADDRESS AT WELL LOCATION 5857 E FLAMINGO RD.
LAS VEGAS, NV 89122

2. LOCATION SW ¼ SW ¼ Sec 15 T 21 S R 62 E CLARK County

PERMIT NO. (Issued by Water Resources) | 161-22-101-001 (Parcel No.) | CLARK (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
3-Monitor wells				
Sandy Clay		0	8	
Silt		8	12	
Silt Gray Clay		12	35	

8. WELL CONSTRUCTION
Depth Drilled 35 Feet Depth Cased 35 Feet

HOLE DIAMETER (BIT SIZE)

	From	To
2 Inches	0 Feet	35 Feet
Inches	Feet	Feet
Inches	Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2	sch40 pvc		0	35

Perforations:
Type perforation Machine
Size perforation .04 slot
From 10 feet to 35 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 35 feet

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 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 0018916 & 0018917
Nevada driller's license number issued by the Division of Water Resources, the on-site driller ABDS2161
Signed (By driller performing actual drilling on site or contractor)
Date 3/15/2007

Date started 2/21, 20 2007
Date completed 3/2, 20 2007

7. WELL TEST DATE
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

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

APR 1 1 2007

(Rev 12/01) USE ADDITIONAL SHEETS IF NECESSARY

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