COPIES TO
- DIVISION OF WATER RESOURCES
- CLIENT'S COPY
- 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. 105019
Permit No.
Basin 212

NOTICE OF INTENT NO. 33304

1. OWNER COUNTY OF CLARK (UMC)
MAILING ADDRESS 1800 W CHARLESTON BLVD
LAS VEGAS, NV 89102

ADDRESS AT WELL LOCATION 1000 Shadow Lane
Las Vegas, NV

2. LOCATION SW ¼ SW ¼ Sec 33 T 20 S R 61 E CLARK County

PERMIT NO. DW1265 (Issued by Water Resources) 139-33-405-001 (Parcel No.) Subdivision Name

3. WORK PERFORMED
☒ New Well ☐ Replace ☐ Recondition
☐ Deepen ☐ Abandon ☐ Other

4. PROPOSED USE ✓DW
☐ Domestic ☐ Irrigation ☐ Test
☐ Municipal/Industrial ☐ Monitor ☐ Stock

5. WELL TYPE
☐ Cable ☐ Rotary ☐ RVC
☐ Air ☐ Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
2-Dewater wells				
Brown Silty dirt		0	14'	14'
Caliche		14'	16'	2'
Brwon silty clay		16'	22'	6'
Caliche		22'	23'	1'
Silt	x	23'	30'	7'
WGS84				
N36 09 587				
W115 09 049				

RECEIVED
MAR 31 2008
LAS VEGAS OFFICE

Date started 3/13, 20 08
Date completed 3/13, 20 08

7. WELL TEST DATE

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	
24	Inches	0	Feet	30	Feet
	Inches		Feet		Feet
	Inches		Feet		Feet

CASING SCHEDULE

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

Perforations:
Type perforation Machine
Size perforation 1/4"x2.5 x 21 per ft.
From 10 feet to 30 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 30 feet

9. WATER LEVEL

Static water level 15 feet below land surface
Artesian flow no 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 18916 & 18917
Nevada driller's license number issued by the Division of Water Resources, the on-site driller ABDS2161
Signed [signature]
By driller performing actual drilling on site or contractor
Date March 27, 2008

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