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. 105936
Permit No.
Basin 212

NOTICE OF INTENT NO. 33319

1. OWNER CITY OF HENDERSON
MAILING ADDRESS 240 WATER ST. POB 95050
HENDERSON, NV 89009

ADDRESS AT WELL LOCATION 1650 E GALLERIA DR.
HENDERSON, NV

2. LOCATION SE ¼ SE ¼ Sec 29 T 21 S R 63 E CLARK County

PERMIT NO. (Issued by Water Resources) | 160-29-801-003 (Parcel No.) | 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
Lowered 2 monitor well				
#10 & #11				
Install 6' 6" pvc casing				
2" pvc astm-f40 well				
casing.				
Backfill 2' with bentonite				
1' cement seal.				
Facility # NV1141190024				
WGS84				
N36 05 218				
W115 57 520				

Date started 5/16, 20 08
Date completed 5/16, 20 08

7. WELL TEST DATE

TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

G.P.M.	Drawdown (Feet Below Static)	Time (Hours)

DCNR/DWR RECEIVED JUN 30 2008 LAS VEGAS OFFICE

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)

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 Seal Type:
Depth of Seal ☐ Neat Cement
Placement Method: ☐ Pumped ☐ Cement Grout
☐ Poured ☐ Concrete Grout
Gravel Packed: ☐ Yes ☐ No
From ____ feet to ____ 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 18916 & 18917
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2231
Signed [signature] By driller performing actual drilling on site or contractor
Date June 16, 2008

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