

STATE OF NEVADA
DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
Log No. 105967
Permit No. _____
Basin 212

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 34565

1. OWNER City of North Las Vegas ADDRESS AT WELL LOCATION 1659 N. Main St.
MAILING ADDRESS 22160 Civic Center Dr. North Las Vegas, NV
North Las Vegas, NV 89030 Subdivision Name: _____ County: Clark

2. LOCATION SE 1/4 SE 1/4 Sec 22 T 20 N R 01 E Latitude N 36° 11' 25.9" UTM E NAD 27
PERMIT/WAIVER No. 139-12-812-001 Longitude W 115° 08' 03.0" N NAD 83/WGS 84
Issued by Water Resources Parcel No. PMW-8

3. WORKED PERFORMED New Well Replace Recondition
 Deepen Other

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

5. WELL TYPE Cable Rotary RVC Other Auger

6. LITHOLOGIC LOG PMW-8

Material	Water Strata	From	To	Thick-ness
<u>Fill</u>		<u>0</u>	<u>2</u>	
<u>Sandy clay</u>		<u>2</u>	<u>13</u>	
<u>Sand</u>	<u>13</u>	<u>13</u>	<u>15</u>	
<u>Sandy clay</u>		<u>15</u>	<u>17</u>	
<u>clay</u>		<u>17</u>	<u>25</u>	

9. WELL CONSTRUCTION

Depth Drilled 25 Feet Depth Cased 25 Feet

HOLE DIAMETER (BIT SIZE)

From	To
<u>10</u> Inches	<u>0</u> Feet <u>25</u> Feet
_____ Inches	_____ Feet _____ Feet
_____ Inches	_____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4"</u>	<u>PVC</u>	<u>Sch 40</u>	<u>0</u>	<u>25</u>

Perforations:

Type of perforation Factory slot

Size of perforation .020

From 10 feet to 25 feet

From _____ feet to _____ feet

Annular Seal: Yes No

Neat Cement _____ to _____ Pumped Poured

Cement Grout _____ to _____ Pumped Poured

Concrete Grout 0 to 6 Pumped Poured

≥30% Bentonite Grout _____ to _____ Pumped Poured

Gravel Pack: Yes No 8 to 25 Pumped Poured

Type: #3

Bentonite Chips: Yes No 6 to 8 Pumped Poured

Type: Hole plug

Date started: June 3, 20 08

Date completed: June 3, 20 08

7. Water Level

Static water level: 13 feet below land surface

Artesian Flow: _____ G.P.M. _____ P.S.I.

Water Temperature: _____ °F

Quality: _____

8. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

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

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name Elite Drilling Inc. Contractor

Address 4255 W. Post Rd. Contractor

Las Vegas, NV 89118

Nevada contractor's license number 0054931

issued by the State Contractor's Board

Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-1869

Signed _____ By driller performing actual drilling on-site or contractor

Date 6/25/08