

PRINT OR TYPE ONLY  
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WELL DRILLER'S REPORT

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

NOTICE OF INTENT NO. 34739  
14355 DIXON ST

1. OWNER DAVIS BROS INVESTMENTS ADDRESS AT WELL LOCATION L.V. NV -  
Preferred Concrete LLC  
MAILING ADDRESS 7210 Placid ST  
L.V. NV 89119  
2. LOCATION NE 1/4 SW 1/4 Sec 19 T. 23 N. R. 61 E County CLARK  
PERMIT NO. 73348 Issued by Water Resources Parcel No. 191-19-301-006 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	Thick-ness
Drilled out old casing 400 ft				
filled with cement				
Re drilled & Drill Bit went outside of hole into New FORMATION - 12 1/4" BIT				
Plugged Well				
WAIVER NO. R-1447				
02-27-09				
35.931274°N				
115.199895°W NAD27 (T)				
N 35-55-52.5				
W 115-12-02.6				

DCNR/DWR RECEIVED  
MAR 03 2009  
LAS VEGAS OFFICE

8. WELL CONSTRUCTION

Depth Drilled \_\_\_\_\_ Feet Depth Cased \_\_\_\_\_ Feet

HOLE DIAMETER (BIT SIZE)

From		To	
Inches	Feet	Inches	Feet
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
			0009	19

Perforations:

Type perforation \_\_\_\_\_

Size perforation \_\_\_\_\_

From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  Neat Cement  
 Cement Grout  
 Concrete Grout

Depth of Seal \_\_\_\_\_

Placement Method:  Pumped  Poured

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 \_\_\_\_\_

Date started 02-23-09, 20 \_\_\_\_\_  
Date completed 02-27-09, 20 \_\_\_\_\_

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			

10. DRILLER'S CERTIFICATION

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

Name VERNON H. DIMICK Contractor

Address 5360 N. BONITA VISTA ST Contractor  
L.V. NV 89149

Nevada contractor's license number issued by the State Contractor's Board 10062

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 552

Signed V.H. Dimick  
By driller performing actual drilling on site or contractor

Date 03-02-09