

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

OFFICE USE ONLY
Log No. 111077
Permit No. _____
Basin _____

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. 32487

1. OWNER PUBLIC RIGHT OF WAY
MAILING ADDRESS 500 S GRAND CENTRAL PARKWAY LAS VEGAS NV.
2. LOCATION SE 1/4 NW 1/4 Sec 09 T 21 N/S R 61 E
PERMIT/WAIVER No. M.D. 2848 162-09-299.006
Issued by Water Resources Parcel No.

ADDRESS AT WELL LOCATION INDUSTRIAL + CIRCUS CIRCUS LAS VEGAS NV.
Subdivision Name: _____ County: CLARK
Latitude 36° 08' 20" 80 UTM E NAD 27
Longitude 115° 10' 01" 37 N NAD 83/WGS 84

3. WORKED PERFORMED
 New Well Replace Recondition
 Deepen Other

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

5. WELL TYPE
 Cable Rotary RVC
 Air Other USA

6. LITHOLOGIC LOG				
Material	Water Strata	From	To	Thickness
ASPHALT		0.0	0.25	2.5
STONE FILL		0.25	1.0	0.75
SANDY SILT		1.0	5.0	4.0
CALICHE		5.0	6.0	1.0
SILT SANDY CLAY		6.0	11.0	5.0
CALICHE		11.0	12.0	1.0
SILT CLAY	YES	12.0	25.0	13.0

9. WELL CONSTRUCTION			
Depth Drilled	Feet	Depth Cased	Feet
<u>25</u>		<u>25</u>	

HOLE DIAMETER (BIT SIZE)			
	From	To	
<u>8</u>	<u>0</u>	<u>25</u>	
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)
<u>2"</u>		<u>SCH 40</u>	<u>0</u>	<u>25</u>

Perforations:
Type of perforation MACH WIRE SLOT
Size of perforation .020
From 5 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 1 Pumped Poured
 ≥30% Bentonite Grout _____ to _____ Pumped Poured
Gravel Pack: Yes No 3 to 25 Pumped Poured
Type: NO. 3
Bentonite Chips: Yes No 1 to 3 Pumped Poured
Type: 3/8" SEAL

Date started: 5-3 20 10
Date completed: 5-3 20 10

7. Water Level
Static water level: 14.6 feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ °F
Quality: _____

8. 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 BOUCE DRILLING Contractor
Address 7150 PLACID ST LAS VEGAS NV 89119 Contractor
Nevada contractor's license number issued by the State Contractor's Board 51266
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2357
Signed Misty Winston
By driller performing actual drilling on-site or contractor
Date 5-7-2010

DNCR/DWR
RECEIVED

MAY 21 2010

LAS VEGAS OFFICE

USE ADDITIONAL SHEETS IF NECESSARY

(Rev. 05-06)