

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

OFFICE USE ONLY
Log No. 123454
Permit No. _____
Basin No. _____

**PRINT OR TYPE IN BLACK INK 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. 38049
WELL NAME (if applicable): well#74

1. OWNER/CLIENT NAME Clark County - Public Right of Way DETAILED ADDRESS AT WELL LOCATION East Patrick Lane just east of
MAILING ADDRESS 500 South Grand Central PKWY 2nd McLeod Drive, Clark County NV
floor Las Vegas NV 84155
Subdivision Name: _____ County: _____

2. PLS LOCATION SW ¼ NE ¼ 36 Sec 21S N/S 61 E Latitude 36 04" 44.61" N UTM E _____ NAD 27
PERMIT/WAIVER NO. DW-1378 1162-36-699-022 Longitude 115. 06" 34.36" W UTM N _____ x NAD 83/WGS 84
Issued by Water Resources

3. WORKED PERFORMED
 New Well Deepen: Orig WL# _____
 Replacement: Original well log # _____
 Recondition: Original well log # _____

4. PROPOSED USE
 Domestic Irrigation Monitor Auger
 Mining / Dewater Com / Ind Stock Air
 Test / Other Mun / QM Rec Other

5. WELL TYPE
 Auger Rotary RVC
 Air Mud Sonic

6. LITHOLOGIC LOG				
Material Encountered	Lost Circ.	Water Strata	From	To
Packed silty clay-calicchi			0	10
calicchi-red silty clay			10	11
red silty clay-calicchi			11	18
calicchi - silty clay			18	20
silty clay- calicchi			20	25
calicchi - red silty clay			25	29
red silty clay			29	50
Note - Annular Material				
Gravel pack			0	10
DCNR/DWR/SNBO RECEIVED				
AUG 10 2015				

9. INSTRUCTION				
Depth Drilled:	50	Feet	Depth Cased:	50
HOLE DIAMETER (BIT SIZE)				
	From	To		
24	Inches 0	Feet 50		Feet
	Inches	Feet		Feet
	Inches	Feet		Feet
CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8	6	SDR 21	0	50

ANNULAR MATERIALS				
Sanitary Seal	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
<input type="checkbox"/> Neat Cement	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured	
<input type="checkbox"/> Cement Grout	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured	
<input type="checkbox"/> Concrete Grout	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured	
Bentonite Chips	10 to 12	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured	
<input checked="" type="checkbox"/> Gravel Pack [> 0.2 in.]	12 to 50	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured	
<input type="checkbox"/> Sand Pack [< 0.2 in.]	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured	
<input type="checkbox"/> Other, explain:	_____ to _____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured	

Date started: 13-Jul , 20 15
Date completed: 14-Jul , 20 15

7. WATER QUALITIES
Static water level: 16 Feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ ° Fahrenheit
Water Quality: _____

8. WELL TEST DATA			
Test Method:	G.P.M.	Draw Down (Feet Below Static)	Recorded Time (Hours)
<input type="checkbox"/> Bailor <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			

PERFORATIONS:
Type of perforation: machine slot
Size of perforation: 0.032
From 20 Feet To 50 Feet
From _____ Feet To _____ Feet
From _____ Feet To _____ Feet
From _____ Feet To _____ Feet

10. DRILLER'S CERTIFICATION
This well was drilled under my supervision. This report is true to the best of my knowledge.
Name Viking Drillers, Inc Contractor
Address 5950 Granite Lake Drive, Granite Bay, CA 95746 Contractor
Nevada contractor's license number as issued by the State Contractor's Board. 0034680
Nevada well driller's license number as issued by the Nevada Division of Water Resources (on-site driller) 2361
Signed: _____
Date: 8/5/15
By driller performing actual drilling on site or contractor

36.079085 NAD
-115.1087143 27