

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

OFFICE USE ONLY
Log No. 124469
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. 38091
WELL NAME (if applicable): well#8

1. OWNER/CLIENT NAME Sunrise Ridge Master HOA
MAILING ADDRESS 2555 Wcheyenne Ave
Clark County, NV

DETAILED ADDRESS AT WELL LOCATION O / Las Vegas Wash
Clark County, NV

2. PLS LOCATION SE ¼ SE ¼ 15 Sec 21S N5 62 E
PERMIT/WAIVER NO. DW -1408 181-15-810-003
Issued by Water Resources Current Parcel No.

Subdivision Name: _____ County: Clark
Latitude 36.116723°N UTM E NAD 27
Longitude 115.030736°W UTM N NAD 83/WGS 84

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

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

5. WELL TYPE
 Auger Rotary RVC
 Air Mud Sonic
 Other

6. LITHOLOGIC LOG

Material Encountered	Lost Circ.	Water Strata	From	To
silty sand-silty sandy clay			0	6
red silty clay & Gravel			6	10
silty gravel			10	15
red silty clay			15	23
silty gravel			23	28
hard clay			28	34
hard clay			34	40

9. INSTRUCTION

Depth Drilled: 40 Feet Depth Cased: 40 Feet

HOLE DIAMETER (BIT SIZE)

Inches	From	To
<u>24</u>	<u>0</u>	<u>40</u>

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8</u>	<u>6</u>	<u>SCH 40</u>	<u>0</u>	<u>40</u>

DCNR/DWR/SNRC
RECEIVED
JAN 15 2016

ANNULAR MATERIALS

Sanitary Seal Yes 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 <u>8</u>	to <u>10</u>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
<input checked="" type="checkbox"/> Gravel Pack [> 0.2 in.] <u>0</u>	to <u>40</u>	<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

PERFORATIONS:

Type of perforation: machine slot
Size of perforation: 0.032

From	To	From	To
<u>20</u>	<u>40</u>		

Date started: 21-Oct 20 15
Date completed: 21-Oct 20 15

7. WATER QUALITIES
Static water level: 8 Feet below land surface
Artesian Flow: _____ G.P.M. _____ P.S.I.
Water Temperature: _____ ° Fahrenheit
Water Quality: _____

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
Address 5950 Granite Lake Drive, Granite Bay, CA 95746

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			

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: [Signature]
Date: 11/3/16