DIVISION OF WATER RESOURCES

STATE OF NEVADA

DIVISION OF WATER RESOURCES

WELL DRILLERS REPORT

Please complete this form in its entirety

OFFICE USE ONLY
Log No. 18763
Permit No. 33676
Basin 212

1. OWNER Marina Brandolini ADDRESS 2150 E Warm Springs Road Las Vegas Nev

2. LOCATION S 1/2 ¼ SE ¼ Sec. 2 T. 22 N/S R. 61 E. Clark County
PERMIT NO. 33676

3. TYPE OF WORK	4. PROPOSED USE	5. TYPE WELL
New Well ☒ Recondition ☐	Domestic ☒ Irrigation ☐ Test ☐	Cable ☒ Rotary ☐
Deepen ☐ Other ☐	Municipal ☐ Industrial ☐ Stock ☐	Other ☐

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Brn Sandy Clay		0	80	80
Water Gravel		80	92	12
Brn Sandy Clay		92	185	93
Pea Gravel + Sand		185	205	20
Course Gravel		205	228	23
Clay + Gravel		228	263	35
Cemented Gravel		263	271	8
Brn Sticky Clay		271	300	29

RECEIVED
JAN 12 1973
Div. of Water Resources
Branch Office — Las Vegas, Nev.

Date started 5-19, 1977
Date completed 5-29, 1977

7. WELL TEST DATA

Pump RPM	G.P.M.	Draw Down	After Hours Pump

BAILER TEST
G.P.M. 36 Draw down 27 feet ½ hours
G.P.M. Draw down feet hours
G.P.M. Draw down feet hours

8. WELL CONSTRUCTION

Diameter hole 13 inches Total depth 300 feet
Casing record 8 5/8
Weight per foot 12.20 Thickness 10 GA

Diameter	From	To
8 5/8 inches	0 feet	300 feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet
inches	feet	feet

Surface seal: Yes ☒ No ☐ Type Cement
Depth of seal 50 feet
Gravel packed: Yes ☐ No ☒
Gravel packed from feet to feet

Perforations:
Type perforation Torch
Size perforation 1/4 x 4 x 4 around
From 80 feet to 260 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

9. WATER LEVEL

Static water level 50 Feet below land surface
Flow G.P.M.
Water temperature ° F. Quality

10. DRILLERS CERTIFICATION

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

Name Allen Water Well Service
Address P.O. Box 15149, L.V. Nev
Nevada contractor's license number 5095
Nevada driller's license number NO
Signed [signature]
Date 1-10-77

USE ADDITIONAL SHEETS IF NECESSARY

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