

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. **13099**

1. OWNER **CHARLIE BROWN CONSTRUCTION, INC.** ADDRESS AT WELL LOCATION **801 W. Colton Ave**  
MAILING ADDRESS **801 W. COLTON AVENUE** **NORTH LAS VEGAS, NV 89030**  
2. LOCATION **SE 1/4 S W 1/4 Sec 11 T 20 N R 61 E** **CLARK** County  
PERMIT NO. **M O - 2432** Issued by Water Resources **139-11-402-001** Parcel No.  
Subdivision Name

3. WORK PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Abandon  Other  
4.  Domestic  Municipal/Industrial  Irrigation  Test  Stock  
 Monitor  Cable  Rotary  RVC  
 Other **Auger**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
Gravelly Sand		0'	8'	8'
Sand-Silt Clay Mixture		8'	14'	6'
Caliche		14'	16'	2'
Sand-Silt-Clay Mixture		16'	20'	4'
Silty clay		20'	46'	26'
Caliche		46'	48'	2'
Silty clay		48'	64'	16'
Silty clay w/ gravel		64'	66'	2'
Silty clay		66'	70'	4'

8. WELL CONSTRUCTION  
Depth Drilled **71** Feet Depth Cased **70** Feet  
HOLE DIAMETER (BIT SIZE)  
Inches: **8** From **0** To **71** Feet  
Inches: **0** From **71** To **70** Feet  
Casing Schedule  
Size O.D. (Inches) Weight/Ft. (Pounds) Wall Thickness (Inches) From (Feet) To (Feet)  
**2.335** **0.64** **0.154** **0** **70**

Perforations:  
Type perforation **FACTORY SLOT**  
Size perforation **0.020"**  
From **30** feet to **70** feet  
Surface Seal:  Yes  No Seal Type:  Neat Cement  Cement Grout  Concrete Grout  
Placement Method:  Pumped  Poured  
Gravel Packed:  Yes  No  
From **27** feet to **70** feet

9. WATER LEVEL  
Static water level **52.28** feet below land surface  
Artesian flow **52.28** G.P.M. P.S.I.  
Water temperature **52.28** °F Quality

10. DRILLER'S CERTIFICATION  
This well was drilled under my supervision and the report is true to the best of my knowledge.  
Name **Thomas High** Contractor  
Address **4670 So. Palavis Ave. Las Vegas, NV 89103**  
Nevada contractor's license number **M-1869**  
Nevada contractor's license number issued by the State Contractor's Board

7. TEST METHOD:  Bailor  Pump  Air Lift  
G.P.M. (Feet Below Sate) Time (Hours)  
Date started **April 19** 19 **94**  
Date completed **April 19** 19 **94**  
WELL TEST DATA

RECEIVED

DIV. OF WATER RESOURCES  
ERROTON OFFICE - LAS VEGAS, NV