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. 60289
Permit No.
Basin 212

1. OWNER Mr. Griffin ADDRESS 4975 N. Miller, L.V.

2. LOCATION SE ¼ SE ¼ Sec. 33 T. 19 N/S R. 60 E. Clark County
PERMIT NO.

3. TYPE OF WORK
New Well ☒ Recondition ☐
Deepen ☐ Other ☐

4. PROPOSED USE
Domestic ☒ Irrigation ☐ Test ☐
Municipal ☐ Industrial ☐ Stock ☐

5. TYPE WELL
Cable ☒ Rotary ☐
Other ☐

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Caliche		0	25	
Sandy Clay		25	62	
Caliche		62	90	
Clay Sand		90	105	
Hard Limestone		105	115	
Sandy Clay Water	xx	115	125	10
Clay		125	165	
Caliche		165	185	
Sandy Clay		185	205	
Sand Water	xx	205	215	10
Cemented Gravel Water		215	300	

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BRANCH OFFICE
LAS VEGAS, NEVADA

Date started April 18, 19 72
Date completed May 1, 19 72

7. WELL TEST DATA

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

BAILER TEST
G.P.M. ..... Draw down ..... feet ..... hours
G.P.M. ..... Draw down ..... feet ..... hours
G.P.M. ..... Draw down ..... feet ..... hours

8. WELL CONSTRUCTION
Diameter hole 12 inches Total depth 300 feet
Casing record
Weight per foot Thickness 10ga

Diameter	From	To
8 5/8 inches	+1 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 50 feet to 300 feet

Perforations:
Type perforation Torch
Size perforation ¼" X 18"
From 100 feet to 300 feet
From feet to feet
From feet to feet
From feet to feet
From feet to feet

9. WATER LEVEL
Static water level 118 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 Vernon H Dimick
Address 5434 W Alexander L.V.
Nevada contractor's license number 10062
Nevada driller's license number 552
Signed V. H. Dimick
Date Nov. 27, 1972

USE ADDITIONAL SHEETS IF NECESSARY

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