

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

OFFICE USE ONLY

Log No. 65604

Permit No. 212

Basin 212



NOTICE OF INTENT NO. 10777

1. OWNER ITT SHERATON ADDRESS AT WELL LOCATION DESERT INN
MAILING ADDRESS 3753 HOWARD HUGHES PKWY #200 LAS VEGAS, NV 89109 3145 LAS VEGAS BLVD S. LAS VEGAS, NV
2. LOCATION NW 1/4 ENE 1/4 Sec 16 T 21 NR 61 E CLARK County
PERMIT NO. MO-2298 Issued by Water Resources Parcel No. Subdivision Name

3. WORK PERFORMED
 New Well Replace Recondition
 Deepen Abandon Other

4. PROPOSED USE
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock

5. WELL TYPE
 Cable Rotary RVC
 Air Other

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
ASPHALT/FILL		0	1	1
SILTY SAND		1	10	9
CALICHE		10	18	8
GRAVELLY SAND		18	20	2
SILTY SAND		20	22.5	2.5
CEMENTED SAND & GRAVEL		22.5	33	10.5
CLAYEY GRAVEL		33	34.5	1.5
GRAVELLY CLAY		34.5	35	0.5

TD = 35'

8. WELL CONSTRUCTION
 Depth Drilled 35 Feet Depth Cased 35 Feet

HOLE DIAMETER (BIT SIZE)
 From 6 Inches To 35 Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2"	0.7 lbs	SCH 40	0	35

Perforations:
 Type perforation FACTORY SLOTTED
 Size perforation 0.020
 From 20 feet to 35 feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No
 Depth of Seal 0-16/14-16 BENT
 Placement Method: Pumped Poured
 Seal Type: Neat Cement Cement Grout Concrete Grout

Gravel Packed: Yes No
 From _____ feet to _____ feet

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 JUL 26 1995

Div. of Water Resources
 Branch Office Las Vegas, NV

Date started 7-1 1993
 Date completed 7-1 1993

7. WELL TEST DATA

TEST METHOD: Bailer Pump Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)

9. WATER LEVEL
 Static water level 18 feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °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 DON WILSON Contractor
 Address 4670 S. POLARIS AV. LAS VEGAS, NV 89103 Contractor
 Nevada contractor's license number issued by the State Contractor's Board _____
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-1589
 Signed Ronald J. Wilson
 By driller performing actual drilling on site or contractor
 Date _____