



PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT ^{in back}

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 290771
 10557

1. OWNER City of Henderson ADDRESS AT WELL LOCATION MW-6
 MAILING ADDRESS 640 Water Street Henderson NV 89015
 2. LOCATION NW 1/4 NW 1/4 Sec 9 T. 22 N. R. 62 E Clark County
 PERMIT NO. MD771 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 auger

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
AC-Base		0	1	1
Clayey sand w/ siltstone		1	3 1/2	2 1/2
Silty clay		3 1/2	5 1/2	2
Silty sand		5 1/2	10 1/2	5
Clayey sand w/ silty clay		10 1/2	17	6 1/2

8. WELL CONSTRUCTION
 Depth Drilled 17 Feet Depth Cased 17 Feet
 HOLE DIAMETER (BIT SIZE)
 From 6 Inches To 17 Feet
 From 0 Feet To 17 Feet
 From 0 Feet To 17 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2</u>		<u>Sch 40</u>	<u>0</u>	<u>17</u>

Perforations:
 Type perforation _____
 Size perforation 1010
 From 7 feet to 17 feet
 From _____ feet to _____ feet
 Surface Seal: Yes No Seal Type:
 Depth of Seal 4 Neat Cement
 Placement Method: Pumped Cement Grout
 Poured Concrete Grout
 Gravel Packed: Yes No
 From 5 feet to 17 feet

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MAR 06 1995

Div. of Water Resources
 Branch Office - Las Vegas, NV

9. WATER LEVEL
 Static water level _____ 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 Western Technologies Inc.
 Address 3611 West Tompkins Avenue Las Vegas, NV 89103
 Nevada contractor's license number issued by the State Contractor's Board NA
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M1761
 Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date 4-25-94

Date started 4/4 1994
 Date completed 4/16 1994

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailor <input type="checkbox"/> Pump <input type="checkbox"/> Air Lift			