

STATE OF NEVADA  
 DIVISION OF WATER RESOURCES  
**WELL DRILLER'S REPORT**

OFFICE USE ONLY  
 Log No. **73335**  
 Permit No. \_\_\_\_\_  
 Basin **212**

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

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

NOTICE OF INTENT NO. **15150**

1. OWNER **Harrison Kemp Jones Chartered** ADDRESS AT WELL LOCATION **Sunsett w/o**  
 MAILING ADDRESS **4343 So. Polaris Ave, Stephanie Well No. MW-5**  
**Las Vegas, Nevada 89103**

2. LOCATION **1/4 NW 1/4 Sec 24 T 22 N R 62 E Clark** County  
 PERMIT NO. **178-04-101-001** Parcel No. **Sunsett Village** 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
<p>We were unable to pull casing so the hole casing was drilled out to a depth of 15' and the entire hole was filled with Bentonite Pellets which were then hydrated.</p>				

8. WELL CONSTRUCTION  
 Depth Drilled **15** Feet Depth Cased \_\_\_\_\_ Feet

HOLE DIAMETER (BIT SIZE)  
 From **0** To **15**  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>2</b>			<b>0</b>	<b>15</b>

Perforations:  
 Type perforation \_\_\_\_\_  
 Size perforation \_\_\_\_\_  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal **15**  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout

Gravel Packed:  Yes  No **Bentonite Pellets**  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

9. WATER LEVEL  
 Static water level: \_\_\_\_\_ feet below land surface  
 Artesian flow: \_\_\_\_\_ G.P.M.  
 Water temperature: \_\_\_\_\_ °F Quality \_\_\_\_\_

Date started **12-4-98**, 19\_\_\_\_  
 Date completed **12-4-98**, 19\_\_\_\_

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<p>N.A.</p>		

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.

Name **Terracon Consultants** Contractor  
 Address **4343 So. Polaris Ave, Contractor**  
**Las Vegas, NV. 89103**

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 **M1944**

Signature **Thomas Beal**  
 By driller performing actual drilling on site or contractor

Date **12-21-98**