

OFFICE USE ONLY  
 Log No. **76013**  
 Permit No. \_\_\_\_\_  
 Basin **212**

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

**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. **16565**

1. OWNER **TAB** ADDRESS AT WELL LOCATION **In Clark County from Chilton to Stewart**  
 MAILING ADDRESS **Stewart NV**

2. LOCATION **SW 1/4 S 19 T 20 N R 62 E Clark** County  
 PERMIT NO. **DW1092B** Issued by Water Resources Parcel No. **140-32-096-002** 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
<b>3 Pull Casings</b>				
<b>clean to 10'</b>				
<b>cap w/</b>				
<b>concrete</b>				

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

HOLE DIAMETER (BIT SIZE)  
 From \_\_\_\_\_ To \_\_\_\_\_  
 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>8</b>	<b>100</b>	<b>5/16 40</b>	<b>0</b>	<b>30</b>

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

Surface Seal:  Yes  No Seal Type:  
 Neat Cement  
 Cement Grout  
 Concrete Grout

Depth of Seal **10**  
 Placement Method:  Pumped  Poured

Gravel Packed:  Yes  No  
 From **10** feet to **30** feet

9. WATER LEVEL  
 Static water level \_\_\_\_\_ feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature **12** °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 **CDC**  
 Address **536 E Midland Ontario CA**  
 Nevada contractor's license number **31246** issued by the State Contractor's Board  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **m 1968**  
 Signed \_\_\_\_\_  
 By driller performing actual drilling on site or contractor  
 Date **5-11**

Date started **4-20** 19**69**  
 Date completed **4-20** 19**69**

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

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