

OFFICE USE ONLY
 Log No. 76262
 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. 18581

1. OWNER (AGENT) A. TIBERTI CONSTRUCTION ADDRESS AT WELL LOCATION 2535 LAS VEGAS BLVD. S.
 MAILING ADDRESS: 1806 INDUSTRIAL ROAD LAS VEGAS, NV 89109
LAS VEGAS, NV 89102

2. LOCATION NE 1/4 NE 1/4 Sec. 9 T. 21 N/S R. 61 E CLARK County
 PERMIT NO. DW1099 162-09- Subdivision Name _____
Issued by Water Resources Parcel No.

3. WORK PERFORMED
 New Well Replace Recondition Deepen Abandon Other Re-drill

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
Dewater well #2,3,4,5, & 6				
Concrete		0	4"	
Type II		4"	2'	
Asphalt		2'	2'3"	
Type II		2'3"	2'9"	
Clay		2'9"	19'	
Wet caving clay & gravel		19'	25'	
Red sandy clay		25'	30'	

8. WELL CONSTRUCTION
 Depth Drilled 30' Feet Depth Cased 30' Feet

HOLE DIAMETER (BIT SIZE)
 From 24" Inches To 30' Feet
 _____ Inches _____ Feet _____ Feet
 _____ Inches _____ Feet _____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Pt. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
14	30.71	.250	0	30

Perforations: MACHINE
 Type perforation 1/4X2 1/2 X 12 Around
 Size perforation _____
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet
 From _____ feet to _____ feet

Surface Seal: Yes No Seal Type:
 Neat Cement Cement Grout Concrete Grout
 Depth of Seal _____
 Placement Method: Pumped Poured
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL
 Static water level _____ feet below land surface
 Artesian flow 18' G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

Date started 5/13 1999
 Date completed 5/15 1999

7. WELL TEST DATA

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

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

Name ALLEN DRILLING INC Contractor
 Address 4847 S. VALLEY VIEW Contractor
LAS VEGAS, NV 89103

Nevada contractor's license number issued by the State Contractor's Board 18916
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1376

Signed [Signature]
 By driller performing actual drilling on site or contractor
 Date _____