WHITE—DIVISION OF WATER RESOURCES
CANARY—CLIENT'S COPY
PINK—WELL DRILLER'S COPY

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

STATE OF NEVADA
DIVISION OF WATER RESOURCES

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. 76622
Permit No.
Basin 212

NOTICE OF INTENT NO. 18586

1. OWNER TURNBERRY PARTNERS LLC
MAILING ADDRESS 2777 PARADISE RD.
LAS VEGAS, NV 89109

ADDRESS AT WELL LOCATION TURNBERRY PLACE
2777 PARADISE RD.
LAS VEGAS, NV 89109

2. LOCATION SW ¼ NE ¼ Sec. 9 T. 21 N/S R. 61 E. CLARK County
PERMIT NO. DW1101 (Issued by Water Resources) 162-09-602-006 (Parcel No.) (Subdivision Name)

3. WORK PERFORMED
☐ New Well ☐ Replace ☐ Recondition
☐ Deepen ☐ Abandon ☒ Other Dewater

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	Thickness
12-DEWATER WELLS				
Well #9-12				
Sandy clay		0	17'	
Wet loose clay & gravel		17	20'	
Red sandy clay		20	22'	
Caliche		22	30'	

Date started 7/23, 1999
Date completed 7/26, 1999

7. WELL TEST DATA
TEST METHOD: ☐ Bailer ☐ Pump ☐ Air Lift

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

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

HOLE DIAMETER (BIT SIZE)
24" Inches From 0 Feet To 30 Feet
____ Inches ____ Feet ____ Feet
____ Inches ____ Feet ____ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
14	36.71	.250	0	30

Perforations: MACHINE
Type perforation 1/4"X2 1/2" 16 ROWS
Size perforation
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: ☐ Yes ☒ No
Depth of Seal
Placement Method: ☐ Pumped ☐ Poured
Seal Type: ☐ Neat Cement ☐ Cement Grout ☐ Concrete Grout
Gravel Packed: ☒ Yes ☐ No
From 0 feet to 30 feet

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 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 8-18-99

(Rev. 3-91) USE ADDITIONAL SHEETS IF NECESSARY (O)-627