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

79293

OFFICE USE ONLY
Log No. [redacted]
Permit No.
Basin 212

NOTICE OF INTENT NO. 19673

1. OWNER ASTORIA HOMES
MAILING ADDRESS 9555 DEL WEBB BOULEVARD
LAS VEGAS, NV 89134

ADDRESS AT WELL LOCATION RHODES #15
LAS VEGAS,NV

2. LOCATION N ¼ NW ¼ Sec. 17 T. 22 N/S R. 60 E. CLARK County
PERMIT NO. ____ Issued by Water Resources | 176-17-101-010 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

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Abandon 1 water well				
Well depth 800'				
Fill with 19 1/2 yards of 27				
yards of 27 sack slurry.				
Perforate from 790' to 475'.				
Mills Knife 1/4"x3/8"				

APR 17 2000

Date started 4-5 2000
Date completed 4-5 2000

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 800 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)

Perforations:
Type perforation Mills Knife
Size perforation 1/4" x 3/8"
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 ____ feet to ____ 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 18917 issued by the State Contractor's Board
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1301
Signed ____ By driller performing actual drilling on site or contractor
Date 4-12-00

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