

OFFICE USE ONLY  
 Log No. 79620  
 Permit No. DW 1112  
 Basin 212

41739

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. 41739

1. OWNER CAS VEGAS PAVING ADDRESS AT WELL LOCATION END OF E. SUNSET RD # CAS VEGAS WASH  
 MAILING ADDRESS 4440 S. DECATUR  
CAS VEGAS, NV 89103

2. LOCATION SW 1/4 S 1/2 Sec 30 T 21 N/S R. 65 E CLARK County  
 PERMIT NO. DW 9112 160-30-003 Parcel No. Subdivision Name

3. 171-278 WORK PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Abandon  Other well points

4. PROPOSED USE  
 Domestic  Irrigation  Test  
 Municipal/Industrial  Monitor  Stock

5. WELL TYPE  
 Cable  Rotary  RVC  
 Air  Other well points

6. ~~171-278~~ LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
1. Silty sand w/beans (SM) dense light brown, slightly moist	4'	0	12	12'
2. Lean clay (CL) porous, stiff, brown	4	12	16	6'
3. Sandy lean clay (CL) very stiff, gedy-wet	4'	18	19	1'
4. Cemented sand & gravel - HAPL gummy	4'	19	21	2'

8. WELL CONSTRUCTION  
 Depth Drilled 20' Feet Depth Cased 17-20' Feet

HOLE DIAMETER (BIT SIZE)  
 From 2 Inches To 20 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2"</u>	<u>PLX</u>	<u>Sch 40 well point</u>	<u>0</u>	<u>20'</u>

Perforations:  
 Type perforation Factory perf well points  
 Size perforation .070  
 From 20 feet to 18' 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 4 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature \_\_\_\_\_ °F Quality Good

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

Name Foothill Surg & Develping Contractor  
 Address 905 E. THIRD ST. COCONA, CA 91719 Contractor

Nevada contractor's license number issued by the State Contractor's Board 0035906  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller M2119

Signed Jim J. Smith  
 By driller performing actual drilling on site or contractor  
 Date 3-10-00

Date started 3-10 1900  
 Date completed 3-10 1900

7. WELL TEST DATA

TEST METHOD:  Bailer  Pump  Air Lift

G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<u>TRPSH Pump Appx 50</u>	<u>0</u>	<u>20 min</u>