

OFFICE USE ONLY  
 Log No. 84669  
 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. 21732  
Hammock Wash - West

1. OWNER Las Vegas Paving ADDRESS AT WELL LOCATION ① Boulder Highway  
 MAILING ADDRESS 4420 S. Decatur  
Las Vegas, NV  
 2. LOCATION SE 1/4 NW 1/4 Sec. 7 T. 21 N. R. 62 E. Clarke County  
 PERMIT NO. DW1138 Issued by Water Resources Parcel No. 161-07-296-00 Subdivision Name

3. WORK PERFORMED  New Well  Replace  Recondition  Deepen  Abandon  Other TEMPorary  
 4. PROPOSED USE  Domestic  Municipal/Industrial  Irrigation  Monitor  Test  Stock  
 5. WELL TYPE  Cable  Rotary  RVD  Air  Other Bucket

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thick-ness
<u>Station 35+00</u>				
<u>silt</u>	<u>3</u>	<u>0</u>	<u>6</u>	
<u>Gravel/Clay Mix</u>		<u>6</u>	<u>15</u>	
<u>Clay</u>		<u>15</u>	<u>25</u>	

8. WELL CONSTRUCTION  
 Depth Drilled 25 Feet Depth Cased 25 Feet  
 HOLE DIAMETER (BIT SIZE)  
24 Inches From 0 Feet To 25 Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet  
 \_\_\_\_\_ Inches \_\_\_\_\_ Feet \_\_\_\_\_ Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8"</u>	<u>PVC</u>	<u>Sch 40</u>	<u>0</u>	<u>25</u>

Perforations:  
 Type perforation slot  
 Size perforation .030  
 From 5 feet to 25 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal \_\_\_\_\_  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From 0 feet to 25 feet

9. WATER LEVEL  
 Static water level 3 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature cool °F Quality good

Date started 10-29  
 Date completed 10-29

7. WELL TEST DATA

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

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name Chiffon Depatery Contractor  
 Address 536 E. Mainland Contractor  
Ontario Ca.  
 Nevada contractor's license number issued by the State Contractor's Board 0031246  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller AB05-2150  
 Signed Chiffon Depatery  
 By driller performing actual drilling on site or contractor  
 Date 10-29-01