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. 84712
Permit No.
Basin 212

NOTICE OF INTENT NO. 21968

1. OWNER Honda West c/o Mona
MAILING ADDRESS Stoppenbach & Brannan
32 W. Chestnut, Washington PA.
ADDRESS AT WELL LOCATION Falconis Honda
4645 W Tropicana Ave
Las Vegas NV

2. LOCATION NW ¼ NW ¼ Sec. 30 T. 21 N/S R. 61 E. CLARK County
PERMIT NO. Issued by Water Resources | MO 2546A Parcel No. | Falconis Honda 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 Hollow Stem

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
SILTS		0	15	15
SILTS / GRAVEL		15	30	15
CALICHE		30	40	10
SILTS		40	45	5

Date started 3-29-01, 19__
Date completed 3-29-01, 19__

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)

		From	To
10 Inches		0 Feet	45 Feet
Inches		Feet	Feet
Inches		Feet	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4"		040	0	25

Perforations:
Type perforation SLOTTED
Size perforation 020
From 25 feet to 45 feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet
From ____ feet to ____ feet

Surface Seal: ☒ Yes ☐ No
Depth of Seal 22
Placement Method: ☐ Pumped ☒ Poured
Seal Type: ☒ Neat Cement ☐ Cement Grout ☐ Concrete Grout

Gravel Packed: ☒ Yes ☐ No
From 23 feet to 45 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 THF Drilling (Contractor)
Address 2420 S. 16th Ave (Contractor)
Phoenix Az 85005
Nevada contractor's license number issued by the State Contractor's Board 0045849
Nevada driller's license number issued by the Division of Water Resources, the on-site driller M-2183
Signed ____ (By driller performing actual drilling on site or contractor)
Date 9/11/01

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