

OFFICE USE ONLY  
 Log No. 84846  
 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. 21232

1. OWNER U.S. Air Force ADDRESS AT WELL LOCATION \_\_\_\_\_  
 MAILING ADDRESS 4349 Duffer Drive Nellis AFB  
Suite 1601 Nellis AFB  
 2. LOCATION NE 1/4 NE 1/4 Sec 4 T. 20 N/S R. 62 E. Clark County \_\_\_\_\_  
 PERMIT NO. \_\_\_\_\_ Issued by Water Resources \_\_\_\_\_ Parcel No. \_\_\_\_\_ Subdivision Name \_\_\_\_\_

3. WORK PERFORMED 7 wells PROPOSED USE \_\_\_\_\_ 5. WELL TYPE \_\_\_\_\_  
 New Well  Replace  Recondition  Domestic  Irrigation  Test  Cable  Rotary  RVC  
 Deepen  Abandon  Other \_\_\_\_\_  Municipal/Industrial  Monitor  Stock  Air  Other Auger

6. LITHOLOGIC LOG

| Material                    | Water Strata | From | To | Thick-ness |
|-----------------------------|--------------|------|----|------------|
| <u>Drill over 7 2"</u>      |              |      |    |            |
| <u>Well Pull Well</u>       |              |      |    |            |
| <u>Geometry Run Triumbe</u> |              |      |    |            |
| <u>pipe to Bottom</u>       |              |      |    |            |
| <u>of Hole pump</u>         |              |      |    |            |
| <u>Neat Cement</u>          |              |      |    |            |
| <u>to surface with</u>      |              |      |    |            |
| <u>Grout pump</u>           |              |      |    |            |
| <u>7 wells complete</u>     |              |      |    |            |

8. WELL CONSTRUCTION

Depth Drilled \_\_\_\_\_ Feet Depth Cased \_\_\_\_\_ Feet

HOLE DIAMETER (BIT SIZE)

| Inches | Feet  | Feet  |
|--------|-------|-------|
| _____  | _____ | _____ |
| _____  | _____ | _____ |
| _____  | _____ | _____ |

CASING SCHEDULE

| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
|--------------------|---------------------|-------------------------|-------------|-----------|
| _____              | _____               | _____                   | _____       | _____     |
| _____              | _____               | _____                   | _____       | _____     |

Perforations:

Type perforation \_\_\_\_\_  
 Size perforation \_\_\_\_\_

From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type: \_\_\_\_\_  
 Neat Cement  
 Cement Grout  
 Concrete Grout

Placement Method:  Pumped  Poured  
 Poured

Gravel Packed:  Yes  No  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Date started 3-19-2001  
 Date completed 3-24-2001

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 |        |                               |              |
|   |        |                               |              |
|   |        |                               |              |

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 Wayne Christenson Co Contractor  
 Address 12030 E Riggs Rd Henderson Contractor  
Az. 85249  
 Nevada contractor's license number 0019101  
 issued by the State Contractor's Board  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2021  
 Signed Mahel J. Wells  
 By driller performing actual drilling on site or contractor  
 Date 3-24-2001