

STATE OF NEVADA  
DIVISION OF WATER RESOURCES  
WELL DRILLER'S PLUGGING REPORT

OFFICE USE ONLY  
Log No. 103301  
Permit No. \_\_\_\_\_  
Basin 212

PRINT OR TYPE ONLY  
DO NOT WRITE ON BACK

Please complete this form in its entirety in  
accordance with NRS 534.170 and NAC 534.340

NOTICE OF INTENT NO. 31099  
ADDRESS AT WELL LOCATION 2935 Hardin Dr. Henderson  
Nevada 89074  
Subdivision Name: \_\_\_\_\_ County: Clark

1 OWNER Pete Mooney  
MAILING ADDRESS \_\_\_\_\_  
2 LOCATION SE 1/4 SW 1/4 Sec 24 T 22 N/S R 61 E  
PERMIT/WAIVER No. N/A 177-24-406-008  
issued by Water Resources Parcel No.

Latitude N 36.01445 UTM E \_\_\_\_\_  NAD 27  
Longitude W 115.11282 N  NAD 83 WGS 84

3 TYPE OF WELL  
 Domestic  Irrigation  Test  
 Municipal/Industrial  Monitor  Stock

Is this well being plugged because a replacement well was drilled? No  
If yes, what is replacement well NOI? \_\_\_\_\_

Is there an existing well log? yes  
If yes, what is NDWR well log #? 57492

4 EXISTING WELL CONSTRUCTION  
Depth Drilled 215 Feet Depth Cased 215 Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8 5/8</u>			<u>+1</u>	<u>215</u>

Existing Perforations:

Type of perforation	Size of perforation	From	feet to	To	feet
<u>Touch</u>	<u>1 1/4" x 1 3/8"</u>	<u>140'</u>	<u>215'</u>		

7 WELL PLUGGING PROCEDURE

Was well cleaned out to total depth?  yes  no  
If well was not cleaned out to total depth, please explain why: Well was bailed to 200, then no more retrieval

Was the well contaminated?  yes  no  
Was the casing pulled?  yes  no  
Was the casing over drilled?  yes  no

If casing was left in place, please show where additional perforations were made:  
Additional Perforations:  
Type of perforator used: Mills Knife  
From 200 feet to 90 feet Number of perms per linear foot 2 per 2'  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet Number of perms per linear foot \_\_\_\_\_  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet Number of perms per linear foot \_\_\_\_\_  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet Number of perms per linear foot \_\_\_\_\_  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet Number of perms per linear foot \_\_\_\_\_  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet Number of perms per linear foot \_\_\_\_\_

5 WATER LEVEL  
Static water level 140' feet below land surface  
Artesian flow N/A G.P.M. N/A P.S.I.  
Water temperature unknown °F Quality unknown

8 WELL PLUGGING MATERIALS

Material Used			
From <u>+1</u> feet to <u>Bottom</u> feet	<u>Neat Cement</u>	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____ feet to _____ feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____ feet to _____ feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____ feet to _____ feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____ feet to _____ feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____ feet to _____ feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

6 Additional Notes or Comments  
No pump in well well was covered with steel plate laying out. Bailed well until no retrieval, Mills knife from bottom to 50' above water. Pumped neat cement from bottom to surface total of 5 yards cut casing below surface.

Neat Cement Fluid Weight \_\_\_\_\_ lbs/gal  
Bentonite Grout \_\_\_\_\_ % bentonite  
Date Started August 8, 2007  
Date Completed August 9, 2007

9 DRILLER'S CERTIFICATION  
This well was plugged and abandoned under my supervision and the report is true to the best of my knowledge.  
Name WDC Exploration and wells Contractor  
Address 570 Carithian way Contractor  
Las Vegas Nevada 89030  
Nevada contractor's license number \_\_\_\_\_  
issued by the State Contractor's Board 00128582  
Nevada driller's license number issued by the Division of Water Resources, the on-site driller KBDR-2317  
Signed Doh  
By driller performing actual drilling on site or contractor  
Date August 9, 2007

DNWR/DWR  
RECEIVED

AUG-09-2007

LAS VEGAS OFFICE

USE ADDITIONAL SHEETS IF NECESSARY

(Rev. 05-06)