

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

DRILLING

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

OFFICE USE ONLY
Log No. 106068
Permit No. _____
Basin 215

PRINT OR TYPE ONLY
DO NOT WRITE ON BACK

NOTICE OF INTENT NO. 33781
ADDRESS AT WELL LOCATION Valley of Fire State Park
CLARK

1 OWNER Valley of Fire State Park
MAILING ADDRESS 4947 West Unger Drive
Las Vegas NV. 89109

Subdivision Name _____
County _____

2 LOCATION SW 1/4 SW 1/4 Sec 30 T 17 N/S R 67 E
PERMIT/WAIVER No. W-627 079-00-002-012

Latitude 4.36.25.19.85 UTM E _____
Longitude 114.32.5223 N _____
 NAD 27
 NAD 83 WGS 84

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

Is this well being plugged because a replacement well was drilled? NO
If yes, what is replacement well NO? _____

Is there an existing well log? NO
If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION
Depth Drilled 945 Feet
Depth Cased 54 Feet

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: 300' of fill. 12 hrs spent. NO success. 3,000 gals of stiff foam used.

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>14</u>	<u>22.4</u>	<u>.188</u>	<u>0</u>	<u>54</u>

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: _____

Existing Perforations:
Type of perforation No. casing
Size of perforation _____

From _____	feet to _____	feet
From _____	feet to _____	feet
From _____	feet to _____	feet
From _____	feet to _____	feet
From _____	feet to _____	feet

Additional Perforations:
Type of perforator used: No. casing below conduct

From _____	feet to _____	feet	Number of perfs per linear foot _____
From _____	feet to _____	feet	Number of perfs per linear foot _____
From _____	feet to _____	feet	Number of perfs per linear foot _____
From _____	feet to _____	feet	Number of perfs per linear foot _____
From _____	feet to _____	feet	Number of perfs per linear foot _____
From _____	feet to _____	feet	Number of perfs per linear foot _____

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

8 WELL PLUGGING MATERIALS

From	feet to	feet	Material Used	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
<u>600</u>	<u>25</u>	<u>25</u>	<u>NATIVE</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>25</u>	<u>0</u>	<u>0</u>	<u>NEAT</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
From _____	feet to _____	feet	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet	_____	<input type="checkbox"/>	<input type="checkbox"/>

6 Additional Notes or Comments
Information for this drilling obtained from the plugging log sly (separate drilling log not submitted - All into was on plugging log)

Neat Cement Fluid Weight 15.85 lbs/gal
Bentonite Grout _____ % bentonite
Date Started July 15, 08
Date Completed July 15, 08

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 Welco Corp. Contractor
Address P.O. Box 888 Contractor
Fallon NV. 89406
Nevada contractor's license number _____
issued by the State Contractor's Board 11752
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 1195
Signed C. E. Epler
By driller performing actual drilling on site or contractor
Date July 15, 2008

DCNR/DWR RECEIVED
JUL 21 2008
LAS VEGAS OFFICE