

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

OFFICE USE ONLY
Log No. 107242
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. 33695

1 OWNER Valley Health System LLS ADDRESS AT WELL LOCATION 620 Shadow Lane, Las Vegas NV 89106
MAILING ADDRESS 620 Shadow Lane DW-1
Las Vegas NV 89106 Subdivision Name: _____ County: Clark

2 LOCATION NW ¼ SW ¼ Sec 33 T 22S N/S R 61 E Latitude 36 09816 UTM E NAD 27
PERMIT/WAIVER No. DW-1257 139-33-311-001 Longitude 115 10003 N NAD 83/WGS 84
Issued by Water Resources Parcel No.

3 TYPE OF WELL Is this well being plugged because a replacement well was drilled? NO Is there an existing well log? No
 Domestic Irrigation Test
 Municipal/Industrial Monitor Stock
If yes, what is replacement well NOI? _____ If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION
Depth Drilled 40 Feet Depth Cased 40 Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8.625	28.55	.322	+2	40

Existing Perforations:
Type of perforation _____ factory slotted
Size of perforation 0.02
From 10 feet to 40 feet
From _____ feet to _____ feet

5 WATER LEVEL
Static water level 21 feet below land surface
Artesian flow n/a G.P.M. n/a P.S.I.
Water temperature n/a °F Quality good

6 Additional Notes or Comments
.5 Yards Cement

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: _____

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 perforater used: N/A
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 _____

8 WELL PLUGGING MATERIALS
Material Used
From 0 feet to 40 feet neat cement Pumped Poured
From _____ feet to _____ feet Pumped Poured

Neat Cement Fluid Weight 94 lbs/gal
Bentonite Grout _____ % bentonite
Date Started 6/6/2008
Date Completed 6/6/2008

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 & Wells
Contractor
Address 570 Corinthian Way
Contractor
N. Las Vegas, NV 89030
Nevada contractor's license number _____
issued by the State Contractor's Board 0012852
Nevada driller's license number issued by the _____
Division of Water Resources, the on-site driller 2057-T-4
Signed _____
By driller performing actual drilling on site or contractor
Date 7/17/2008

