

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

OFFICE USE ONLY
Log No. **10785a**
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. **33378**

1 OWNER **Public Right of Way**
MAILING ADDRESS **500 South Grand Central Parkway**
Lv, NV 89101

ADDRESS AT WELL LOCATION **Public Right of Way on Flamingo Rd.**
Las Vegas, NV
Subdivision Name **Flamingo** County **Clark**

2 LOCATION NE ¼ NW ¼ Sec 21 T 21S R 62
PERMIT/WAIVER No. **DW-1283** **16121199001**

Latitude **36 06'53.874"** UTM NAD 27
Longitude **115 03'40.308"** N NAD 83/WGS 84

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

is this well being plugged because a replacement well was drilled? **no**
Is there an existing well log? **yes**
If yes, what is replacement well NOI? _____
If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION

Depth Drilled	Feet	Depth Cased	Feet

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/FL (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8	6	3/8	0	35

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

Existing Perforations:

Type of perforation	Size of perforation	From	To
machine slot	0.032	10	35

Additional Perforations:

Type of perforator used:	From	To	Number of perfs per linear foot

5 WATER LEVEL
Static water level **12** feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

8 WELL PLUGGING MATERIALS

From	To	Material Used	Pumped	Poured
0	10	Concrete grout	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input checked="" type="checkbox"/>

6 Additional Notes or Comments
Dewatering Well #17

Neat Cement Fluid Weight **94/7** lbs/gal
Bentonite Grout _____ % bentonite
Date Started **12/17/2008**
Date Completed **12/17/2008**

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 **Viking Drillers Inc.** Contractor
Address **801 Northport Dr.** Contractor
West Sacramento, CA 95691
Nevada contractor's license number issued by the State Contractor's Board **0034680**
Nevada driller's license number issued by the Division of Water Resources, the on-site driller **DEW-2361**
Signed _____ By driller performing actual drilling on site or contractor
Date **1/7/2009**

DCNR/DWR RECEIVED
JAN 20 2009
LAS VEGAS OFFICE

USE ADDITIONAL SHEETS IF NECESSARY

(Rev. 05-06)