

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

OFFICE USE ONLY
Log No. **107855**
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** ADDRESS AT WELL LOCATION **Public Right of Way on Flamingo Rd.**
MAILING ADDRESS **500 South Grand Central Parkway** Las Vegas, NV
Lv, NV 89101 Subdivision Name **Flamingo** County **Clark**

2 LOCATION NE ¼ NW ¼ Sec 21 T 21S R 62 E Latitude **36 06'53.805"** UTM E _____ NAD 27
PERMIT/WAIVER No. **DW-1283** **16121199001** Longitude **115 03'42.370"** N _____ NAD 83/WGS 84

3 TYPE OF WELL **dewater** Is this well being plugged because a replacement well was drilled? **no** Is there an existing well log? **yes**
 Domestic Irrigation Test Municipal/Industrial Monitor Stock If yes, what is replacement well NO? _____ 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/Ft. (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	Concrete grout	Pumped	Poured
0	10		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6 Additional Notes or Comments

Dewatering Well #20

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