

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

OFFICE USE ONLY
Log No. **108969**
Permit No. _____
Basin _____

**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. **34347**

1 OWNER City of Las Vegas ADDRESS AT WELL LOCATION 6005 Vegas Valley Dr.
MAILING ADDRESS 400 E. Stewart Ave Las Vegas, NV
Las Vegas, Nv 89101-2913 Subdivision Name _____ County _____

2 LOCATION SE ¼ SW ¼ Sec 10 T 21S N/S R 62 E Latitude See Attached UTM E _____ NAD 27
PERMIT/WAIVER No. DW-1292 161-10-401-004 Longitude _____ N _____ NAD 83/WGS 84
Issued by Water Resources Parcel No _____

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 #? ?

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	6	3/8	0	40

Existing Perforations:

Type of perforation	Size of perforation	From	To
0.32			
From <u>20</u>	feet to	<u>40</u>	feet
From _____	feet to	_____	feet
From _____	feet to	_____	feet
From _____	feet to	_____	feet
From _____	feet to	_____	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: _____

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:	From	To	Number of perfs per linear foot

5 WATER LEVEL
Static water level 14 feet below land surface
Artesian flow no G.P.M. _____ P.S.I. _____
Water temperature _____ °F Quality _____

8 WELL PLUGGING MATERIALS

From	To	Material Used	Pumped	Poured
From <u>0</u>	feet to <u>10</u>	feet concrete grout	<input type="checkbox"/> Pumped	<input checked="" 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
Well # 19

Neat Cement Fluid Weight 94/7 lbs/gal
Bentonite Grout _____ % bentonite
Date Started 9/18/2009
Date Completed 9/18/2009

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 M-2091
Signed _____
By driller performing actual drilling on site or contractor
Date 9/30/2009