

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

OFFICE USE ONLY
Log No. 110975
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

1 OWNER CLARK COUNTY (Action) ADDRESS AT WELL LOCATION Paradise NOTICE OF INTENT NO. 32475
MAILING ADDRESS 5233 Rept Area Rd Las Vegas NV 89099 Subdivision Name: _____ County: CLARK
2 LOCATION S 1/4 NW 1/4 Sec 27 T 21 N R 61 E Latitude 36.05.42.18 UTM E NAD 27
PERMIT/WAIVER No. 8-000416 16227201010 Longitude 115 09 05 39 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? _____
If yes, what is replacement well NO? _____
Is there an existing well log? _____
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)
4"	Ave	sch 40	0	35

Existing Perforations:

Type of perforation	Size of perforation	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 perforater used:
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 19 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
From 0	feet to 35	feet	Hole Plug	<input type="checkbox"/>	<input checked="" type="checkbox"/>
From _____	feet to _____	feet	3/8"	<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

REMARKS OF WELL BOX
PULLED CASING 4" X 35
FILLED FROM BOTTOM
TO TOP WITH HOLE PLUGS
3/8"

Neat Cement Fluid Weight _____ lbs/gal
Bentonite Grout _____ % bentonite
Date Started 3-1-10
Date Completed 3-1-10

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 Eagle Drilling Contractor
Address 7150 PLACID STREET Contractor
Las Vegas NV 89119
Nevada contractor's license number 51266
issued by the State Contractor's Board
Nevada driller's license number issued by the Division of Water Resources 2097
Signed _____
By driller performing actual drilling on site or contractor
Date 3-3-10

DNDR/DWR
RECEIVED

MAR 08 2010

LAS VEGAS OFFICE

USE ADDITIONAL SHEETS IF NECESSARY

(Rev 05-06)