

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

OFFICE USE ONLY
Log No. 112727
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. 35233

1 OWNER Clark County (Public Right of Way)
MAILING ADDRESS 500 S. Grand Central Pkwy
Las Vegas, NV 89122-5507

ADDRESS AT WELL LOCATION 200 E Virginia
Subdivision Name: _____ County: Clark

2 LOCATION NE ¼ SE ¼ Sec 13 T 16S N/S R 67 E
PERMIT/WAIVER No. DW-1299 7013701017
Issued by Water Resources Parcel No.

Latitude 36 32'25.28 UTM E NAD 27
Longitude 114 26'20.38 N NAD 83/WGS 84

3 TYPE OF WELL
 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? _____
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

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: _____

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8	6	3/8	0	40

Was the well contaminated? yes no
Was the casing pulled? yes no
Was the casing over drilled? yes no

Existing Perforations:

Type of perforation	From	To
machine slotted	20	40
Size of perforation	0.032	

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 _____ 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	12	concrete grout	<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"/>

6 Additional Notes or Comments
#51 well
sta 420+50

Neat Cement Fluid Weight 94/7 lbs/gal
Bentonite Grout _____ % bentonite
Date Started 3/25/2010
Date Completed 3/25/2010

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
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 _____
Date 7/14/2010
By driller performing actual drilling on site or contractor

**DCNR/DWR
RECEIVED**

SEP 02 2010

USE ADDITIONAL SHEETS IF NECESSARY

LAS VEGAS OFFICE