

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

OFFICE USE ONLY
Log No. 113414
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. 34402
2400 MASER DR.

1 OWNER City of henderson
MAILING ADDRESS 240water st po box 95050
Henderson nv 89009

ADDRESS AT WELL LOCATION _____
Subdivision Name: _____
County: Clark

2 LOCATION SE ¼ SE ¼ Sec 36 T 21s N/SR 62 E
PERMIT/WAIVER No. 161-36-70-005
Issued by Water Resources Parcel No.

Latitude 36.04.35.27. UTM E NAD 27
Longitude 114.59.04.78. 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
If yes, what is replacement well NOI? _____

Is there an existing well log? _____
If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION
Depth Drilled 25 Feet Depth Cased 25 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)
2"	pvc	sch 40	0	25

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: _____

Existing Perforations:
Type of perforation _____
Size of perforation _____
From _____ feet to _____ feet
From _____ feet to _____ feet

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 21 feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ ° F Quality _____

8 WELL PLUGGING MATERIALS

6 Additional Notes or Comments
remore well box
pulled casing
filled from botton
to top with 3/8 Hole plug

**DCNR/DWR
RECEIVED
OCT 21 2010
LAS VEGAS OFFICE**

0171001 well1

Material Used			
From <u>0</u> feet to <u>25</u> feet	3/8Hole plug	<input type="checkbox"/> Pumpe	<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

Neat Cement Fluid Weight _____ lbs/gal
Bentonite Grout _____ % bentonite
Date Started 10/18/2010
Date Completed 10/18/2010

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 Eagle Drilling Services llc Contractor
Address 7150 placid street Contractor
Las Vegas Nv 89119
Nevada contractor's license number _____
issued by the State Contractor's Board 51266
Nevada driller's license number issued by the _____
Division of Water Resources, the on-site driller 2097
Signed _____
By driller performing actual drilling on site or contractor
Date 10/18/2010