

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

OFFICE USE ONLY
Log No. 114085
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. 35154

1 **OWNER** Bixby Land Co.
MAILING ADDRESS 2211 Michelson Dr. Suite 500
Irvine, California 92612

ADDRESS AT WELL LOCATION 7600 Eastgate Road
Henderson, Nevada, 89011

Subdivision Name: TW-3 **County:** Clark

2 **LOCATION** SW 1/4 NE 1/4 Sec 11 T 22 N34R 62E
PERMIT/WAIVER No. N/A 178-11-610-002
Issued by Water Resources Parcel No.

Latitude 36.050453 **UTM E** NAD 27
Longitude -115.017354 **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? No
If yes, what is NDWR well log #? _____

4 **EXISTING WELL CONSTRUCTION**

Depth Drilled	unkn Feet	Depth Cased	49	Feet
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EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2"		PVC Schedule 40	0	49

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	feet to	feet	Number of perfs per linear foot

Existing Perforations:

Type of perforation	Size of perforation	Factory Slotted
		0.02
From	34	feet to 49 feet
From		feet to feet
From		feet to feet
From		feet to feet
From		feet to feet

8 **WELL PLUGGING MATERIALS**

From	feet to	feet	Material Used		
0	1	feet	Concrete	<input type="checkbox"/> Pumpe	<input checked="" type="checkbox"/> Poured
1	49	feet	Benonite Chips	<input type="checkbox"/> Pumpe	<input checked="" type="checkbox"/> Poured
		feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
		feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
		feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
		feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

5 **WATER LEVEL**

Static water level 39.01 feet below land surface
Artesian flow _____ **G.P.M.** _____ **P.S.I.** _____
Water temperature _____ **° F** _____ **Quality** _____

6 **Additional Notes or Comments**

6-8-2011 The monitoring well casing seperated at the first connection during the pulling.

6-13-2011 The monitoring well was over drilled and plugged using 3/8" bentonite chips.

DCNR/DWR RECEIVED
JUN 16 2011

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 Richard Erickson
Contractor

Address 750 S Pilot Road Suite F
Contractor

Las Vegas, Nevada 89119

Nevada contractor's license number _____
issued by the **State Contractor's Board**

Nevada driller's license number issued by the
Division of Water Resources, the **on-site driller** M-2409

Signed Richard Erickson
By driller performing actual drilling on site or contractor

Date 6/15/2011