

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

OFFICE USE ONLY
Log No. 114280
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. 35851

1 OWNER NEVADA POWER COMPANY ADDRESS AT WELL LOCATION NEVERLY REID GARDNER
MAILING ADDRESS C/O LAND SER. STA. #9 STATION MOAPA NV
P.O. BOX 98916 LAS VEGAS 89193 Subdivision Name: _____ County: CLARK

2 LOCATION NW 1/4 NE 1/4 Sec 07 T 15 N/S R 06 E Latitude 36° 05' 29.25" UTM E _____ NAD 27
PERMIT/WAIVER No. 042 07000 002 Longitude 114° 04' 44.08" 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 NO? _____

Is there an existing well log? No
If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION
Depth Drilled 130 Feet Depth Cased 130 Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>4</u>		<u>SCH 40</u>	<u>0</u>	<u>130</u>

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: PERFEAFO

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: _____

Existing Perforations:
Type of perforation MACHINE SCOT
Size of perforation .020

From	feet to	feet to	feet
<u>110</u>		<u>130</u>	

Type of perforator used: BLADE CUTTER

From	feet to	feet	Number of perfs per linear foot
<u>10</u>		<u>130</u>	<u>4</u>

5 WATER LEVEL
Static water level NONE feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

8 WELL PLUGGING MATERIALS
Material Used

From	feet to	feet	Material	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
<u>0</u>		<u>130</u>	<u>CEMENT GROUT</u>	<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"/>

6 Additional Notes or Comments
WELL NO. 5
FACILITY I.D. NO. H-000530

**DCNR/DWR
RECEIVED**

JUL 29 2011

Neat Cement Fluid Weight 94 lbs/gal 5.2
Bentonite Grout _____ % bentonite
Date Started 7-19-2011
Date Completed 7-19-2011

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 EAGLE DRILLING Contractor
Address 7150 PLACIO ST 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 2357

Signed Neil J. Winters
By driller performing actual drilling on-site or contractor
Date 7-21-2011