

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

OFFICE USE ONLY
Log No. 114323
Permit No. _____
Basin 218

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. 35861

1 OWNER COMMONSITE INC. ADDRESS AT WELL LOCATION NV VENERLY REID GARDNER
MAILING ADDRESS PO BOX 10100 S2A20 STATION MOAPA NV
RENO, NV 89520-0024 Subdivision Name: _____ County: CLARK

2 LOCATION S0 1/4 SE 1/4 Sec 05 T 15 N/S R 06 E Latitude 36° 65' 48.83 UTM E _____ NAD 27
PERMIT/WAIVER No. 042-05401204 Longitude 114° 62' 87.07 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 NOI? _____
Is there an existing well log? NO
If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION
Depth Drilled 30 Feet Depth Cased 30 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)
<u>4</u>		<u>SC40</u>	<u>0</u>	<u>30</u>

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 1.20
From 10 feet to 30 feet
From _____ feet to _____ feet

Type of perforator used: NONE
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 22 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
WELL NO. H.M.-52
FACILITY ID NO. H-000530

DCNR/DWR RECEIVED
JUL 29 2011

Material Used			
From <u>0</u> feet to <u>30</u> feet	<u>CEMENT GROUT</u>	<input checked="" 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
From _____ feet to _____ feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

Neat Cement Fluid Weight 94 lbs/gal 5.2
Bentonite Grout _____ % bentonite
Date Started 7-20-2011
Date Completed 7-20-2011

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 DRILL INC 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 Mud J. Wapton
By driller performing actual drilling on-site or contractor
Date 7-21-2011