

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

OFFICE USE ONLY
Log No. 114782
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. 36318

1 OWNER Herbst Development llc Long John Silvers Inc Lease
MAILING ADDRESS 5195 S las Vegas Blvd South Las Vegas
NV 89119

ADDRESS AT WELL LOCATION 300 N Boulder Highway
Subdivision Name: _____ County: Clark

2 LOCATION NW ¼ NE ¼ Sec 18 T 22S N/S/R 63 E
PERMIT/WAIVER No. 8-000664 179 07-811-003
Issued by Water Resources Parcel No.

Latitude 36.02.29.68 UTM E NAD 27
Longitude 114.59.00.23 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 70 Feet Depth Cased 70 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)
4"	pvc	sch 40	0	70

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 perforater used: _____

Existing Perforations:

Type of perforation	Size of perforation	From	feet to	feet
		From		

From	feet to	feet	Number of perfs per linear foot
From			

5 WATER LEVEL
Static water level 63 feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ ° F Quality _____

8 WELL PLUGGING MATERIALS

From	feet to	feet	Material Used	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From	2'	70	Quich Grout	<input checked="" type="checkbox"/>	<input type="checkbox"/>
From	0	2'	concrete	<input type="checkbox"/>	<input checked="" type="checkbox"/>
From				<input type="checkbox"/>	<input type="checkbox"/>
From				<input type="checkbox"/>	<input type="checkbox"/>
From				<input type="checkbox"/>	<input type="checkbox"/>
From				<input type="checkbox"/>	<input type="checkbox"/>

6 Additional Notes or Comments
remorale well box
pulled casing
filled from botton
To top Quich Grout
**DCNR/DWR
RECEIVED**
JAN 03 2012
LAS VEGAS OFFICE
0861108r mw8

Neat Cement Fluid Weight _____ lbs/gal
Bentonite Grout _____ % bentonite
Date Started 12/22/2011
Date Completed 12/22/2011

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 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 1/3/2012