

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

OFFICE USE ONLY
Log No. 116201
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. 89574

1 OWNER County of Clark (Aviation)
MAILING ADDRESS P.O. Box 11005
Las Vegas Nv. 89111-1005

ADDRESS AT WELL LOCATION Paradise Nv.
(PW-10)
Subdivision Name: _____ County: Clark

2 LOCATION SW $\frac{1}{4}$ NW $\frac{1}{4}$ Sec 27 T 21S N/S R 61 E
PERMIT/WAIVER No. 162-27-201-004
Issued by Water Resources Parcel No. _____

Latitude 36.095663 UTM E NAD 27
Longitude -115.150473 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 NOR? _____
Is there an existing well log? _____
If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION
Depth Drilled 35 Feet Depth Cased 35 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/FL (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4	PVC	Sch-40	35	0

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:

From	Type of perforation	Size of perforation	Machine Slot	To
From	35	feet to	10	feet
From		feet to		feet
From		feet to		feet
From		feet to		feet
From		feet to		feet

Type of perforator used:

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 19 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
Removed Well Box
Pulled Casing
Pumped Cement Grout from bottom to 1 (one) foot
Poured Concrete from 1 (one) foot to surface

DCNR/DWR RECEIVED

From	feet to	feet	Material Used	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured		
From	35	feet to	1	feet	Cement Grout	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From	1	feet to	0	feet	Concrete	<input type="checkbox"/> Pumped	<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

Neat Cement Fluid Weight _____ lbs/gal
Bentonite Grout _____ % bentonite
Date Started 11/2/2012
Date Completed 11/2/2012

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 St. Las Vegas, Nv 89119
Contractor
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 2272-LTD
Signed [Signature]
By driller performing actual drilling on site or contractor
Date 11/5/2012