

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

OFFICE USE ONLY
Log No. 119615
Permit No. 62033
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. 37183

1 OWNER southern nevada oper engr ADDRESS AT WELL LOCATION 6350 HOWDY WELLS
MAILING ADDRESS 6350 Howdy wells ave N las Vegas nv n Las Vegas NV
Subdivision Name: _____ County: Clark

2 LOCATION NW ¼ NE ¼ Sec 34 T 19S N/S/R 62 E Latitude 36.261566 UTM E NAD 27
PERMIT/WAIVER No. R1638 123-34-501-001 Longitude 115.029564 N NAD 83/WGS 84
162033 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? _____
If yes, what is replacement well NOI? _____
Is there an existing well log? yes
If yes, what is NDWR well log #? 58156

4 EXISTING WELL CONSTRUCTION
Depth Drilled 475 Feet Depth Cased 475 Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
7-5/8	38.82	.5	+2	475

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: _____

Existing Perforations:

Type of perforation	Size of perforation	From	To
saw cut	3/16 x 6 row	435 feet	455 feet

Additional Perforations:

Type of perforator used:	From	To	Number of perfs per linear foot
<u>R1638</u>			

5 WATER LEVEL
Static water level 130 feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

8 WELL PLUGGING MATERIALS

Material Used			
From <u>0</u> feet to <u>428</u> feet	<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	

6 Additional Notes or Comments
_____ tremied
_____ filled from botton
_____ to top with cement groit
_____ DCNR/DWR/SNBO
RECEIVED
JAN 31 2014
STATE ENGINEERS OFFICE
2014 MAR 11 AM 9:10

Neat Cement Fluid Weight _____ lbs/gal
Bentonite Grout _____ % bentonite
Date Started 1/20/2014
Date Completed 1/29/2014

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 LLC. Contractor
Address 7150 Placid St., Las Vegas, Nv., 89119 Contractor
Nevada contractor's license number 51266
issued by the State Contractor's Board
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 1/29/2014

(Rev. 05-06) **USE ADDITIONAL SHEETS IF NECESSARY**
36,2615954
-115,0287291
NAD 27