

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

OFFICE USE ONLY
Log No. 121170
Permit No. _____
Basin 220

**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. 38114
WELL NAME (if applicable): 2

1 OWNER Clark County Flood Channel
MAILING ADDRESS 500 S. Grand Central Pkwy.
Las Vegas, NV 89101

ADDRESS AT WELL LOCATION 150' West of Cooper St.
Subdivision Name: _____ County Clark

2 LOCATION SW ¼ NE ¼ Sec 12 T 16S N 67 E
PERMIT/WAIVER No. 070-12-696-004
Issued by Water Resources Parcel No.

Latitude 36 33'27.52"N UTM E NAD 27
Longitude 114 26'38.86"W 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? Yes
If yes, what is NDWR well log #? 115852

4 EXISTING WELL CONSTRUCTION
Depth Drilled _____ 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)
2.375		Sch 40	0	30

Was the well contaminated? yes no
Was the casing pulled? yes no If pulled from: 0 feet to 30 feet
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	Factory Slotted
Size of perforation	<u>0.02</u>
From <u>10</u> feet to <u>30</u> 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	_____
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____

5 WATER LEVEL
Static water level 12 feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

6 Additional Notes or Comments

8 WELL PLUGGING MATERIALS

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

Neat Cement Fluid Weight 94/5.2 lbs/gal
Bentonite Grout 20 % bentonite
Date Started 6/18/2014
Date Completed 6/18/2014

Knocked out bottom grout bottom up

DCNR/DWR/SNBO
RECEIVED
JUL 18 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 Cascade Drilling
Contractor
Address 4590 Copper Sage St
Contractor
Las Vegas, NV 89115

Nevada contractor's license number _____
issued by the State Contractor's Board C23-0073966
Nevada driller's license number issued by the _____
Division of Water Resources, the 2381
Signed [Signature]
By driller performing actual drilling on site or contractor
Date 7-18-14

36.5576697
-114.4433144
MAD
27