

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

OFFICE USE ONLY
 Log No. **121468**
 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. **37635**

1 OWNER **D. R. HORTON** ADDRESS AT WELL LOCATION **3735 FORT APACHE**
 MAILING ADDRESS **1081 WHITNEY RANCH DR** **LV NV**
HENDERSON, NV Subdivision Name: _____ County: **CLARK**
 2 LOCATION **SE 1/4 NE 1/4 Sec 7 T 20 N 36 E** Latitude **36.228084** UTM E NAD 27
 PERMIT/WAIVER No. **139-07-602-002** Longitude **115.298005** N NAD 83/WGS 84
 Issued by Water Resources _____ Parcel No. _____

3 TYPE OF WELL Is this well being plugged because a replacement well was drilled? **NO** Is there an existing well log? **YRS**
 Domestic Irrigation Test Municipal/Industrial Monitor Stock If yes, what is replacement well NO? _____ If yes, what is NDWR well log #? **53540**

4 EXISTING WELL CONSTRUCTION

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8 5/8	16.94	.156	0	700

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

Existing Perforations:

Type of perforation	Size of perforation	From	To
TOPCH	3/16 x 4" HAROUND	480	700

If casing was left in place, please show where additional perforations were made:
 Additional Perforations:
 Type of perforator used: _____

From	To	Number of perms per linear foot
From	feet to	feet

5 WATER LEVEL

Static water level **5.5** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature _____ °F Quality _____

8 WELL PLUGGING MATERIALS

From	To	Material Used	Pumped	Poured
From 470	feet to 700	NEAT CEMENT	<input type="checkbox"/>	<input type="checkbox"/>
From 0	feet to 470	3/8 MINUS	<input type="checkbox"/>	<input type="checkbox"/>
From	feet to	6 SACK	<input type="checkbox"/>	<input type="checkbox"/>
From	feet to		<input type="checkbox"/>	<input type="checkbox"/>
From	feet to		<input type="checkbox"/>	<input type="checkbox"/>
From	feet to		<input type="checkbox"/>	<input type="checkbox"/>

6 Additional Notes or Comments
PIPE RUSTED OUT
WAIVER # R-1663

Neat Cement Fluid Weight _____ lbs/gal
 Bentonite Grout _____ % bentonite
 Date Started **10-17-14**
 Date Completed **10-21-14**

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 **VERNON H. DIMICK** Contractor
 Address **13040 HORSE DR, LV, NV, 89166** Contractor
 Nevada contractor's license number issued by the State Contractor's Board **10062**
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller **552**
 Signed **V.H. Dimick** By driller performing actual drilling on-site or contractor
 Date **10-21-14**