

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

OFFICE USE ONLY
Log No. 122551
Permit No. _____
Basin _____

**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. 38005

1 OWNER County of Clark (PK & Comm Serv) ADDRESS AT WELL LOCATION 5483 Clubhouse Dr
MAILING ADDRESS 500 S. Grand Central Pkwy
Las Vegas, NV 89155 Subdivision Name: _____ County: _____

2 LOCATION SE 1/4 NW 1/4 Sec 4 T 21S N/S R 62 E Latitude UTM E 811729.1 NAD 27
PERMIT/WAIVER No. DW-1333 16104201001 Longitude N 26 757665.7 NAD 83/WGS 84
Issued by Water Resources Parcel No. State Plane

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 50 Feet Depth Cased 50 Feet

| EXISTING CASING SCHEDULE | | | | |
|--------------------------|---------------------|-------------------------|-------------|-----------|
| Size O.D. (Inches) | Weight/Ft. (Pounds) | Wall Thickness (Inches) | From (Feet) | To (Feet) |
| 8 | 6 | 3/8 | 0 | 50 |
| | | | | |
| | | | | |

Existing Perforations:
Type of perforation machine slotted
Size of perforation 0.032
From 30 feet to 50 feet
From _____ feet to _____ 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: _____

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 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 _____ feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

8 WELL PLUGGING MATERIALS

| | | Material Used | | | |
|---------------------------------------|-----------------|---------------------------------|--|--|--|
| From <u>2</u> feet to <u>10</u> feet | concrete grout | <input type="checkbox"/> Pumpe | <input checked="" type="checkbox"/> Poured | | |
| From <u>10</u> feet to <u>12</u> feet | bentonite chips | <input type="checkbox"/> Pumpe | <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 | | |

6 Additional Notes or Comments

LVP Well #249

DNR/DWR/SNBO
RECEIVED
DEC 16 2014

Neat Cement Fluid Weight 94/7 lbs/gal
Bentonite Grout _____ % bentonite
Date Started 6/17/2014
Date Completed 6/17/2014

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 Viking Drillers Inc Contractor
Address 5950 Granite Lake Dr. Contractor
Granite Bay, CA 95691
Nevada contractor's license number 0034680
issued by the State Contractor's Board
Nevada driller's license number issued by the Yadon, DW-2361
Division of Water Resources, the on-site driller
Signed [Signature]
By driller performing actual drilling on site or contractor
Date 7/31/2014