

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

OFFICE USE ONLY
Log No. 122996
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. 38059
WELL NAME (if applicable): Well#250

1 OWNER Clark County - Public Right of Way
MAILING ADDRESS 500 South Grand Central PKWY 2nd Floor
Las Vegas NV 84155

ADDRESS AT WELL LOCATION Intersection of Hacienda Ave and Nellis
BLVD., Clark County NV
Subdivision Name: _____ County: _____

2 LOCATION SE 1/4 NE 1/4 Sec 29 T 21S N/S R 62 E
PERMIT/WAIVER No. DW-1362 161-29-699-008

Latitude 36 05' 44.15"N UTM E NAD 27
Longitude 115 03' 50.48"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
Is there an existing well log? Yes
If yes, what is replacement well NOI? _____
If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION
Depth Drilled 40 Feet Depth Cased 40 Feet

7 WELL PLUGGING PROCEDURE
Was well cleaned out to total depth? yes no

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8	6	SCH 40	0	40

Existing Perforations:
Type of perforation machine slot
Size of perforation 0.032

From	feet to	feet	feet
From <u>20</u>	feet to	<u>40</u>	feet
From _____	feet to	_____	feet
From _____	feet to	_____	feet
From _____	feet to	_____	feet
From _____	feet to	_____	feet

If well was not cleaned out to total depth, please explain why: _____

Was the well contaminated? yes no
Was the casing pulled? yes no If pulled from: 0 feet to 40 feet
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 _____
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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 12 feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

6 Additional Notes or Comments
TYPE OF WELL = Temporary Dewatering

8 WELL PLUGGING MATERIALS

From	feet to	feet	Material Used	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
From <u>0</u>	feet to	<u>10</u>	gravel pack	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
From <u>10</u>	feet to	<u>12</u>	bentonite seal	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From <u>12</u>	feet to	<u>40</u>	impact sand gravel	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____	feet to	_____	_____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____	feet to	_____	_____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____	feet to	_____	_____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

Neat Cement Fluid Weight _____ lbs/gal
Bentonite Grout _____ % bentonite
Date Started April 8 2015
Date Completed April 9 2015

RECEIVED
MAY 26 2015

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. Granite Bay CA 95746 Contractor
Nevada contractor's license number _____
issued by the State Contractor's Board 0034680
Nevada driller's license number issued by the _____
Division of Water Resources, the on-site driller Ed Yaden, 2361
Signed [Signature]
By driller performing actual plugging on site or contractor
Date May 13 2015