

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

OFFICE USE ONLY

Log No. 123200

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. 37155

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 ¼ NE ¼ Sec 9 T 21S N/S R 62 E Latitude 36.137200 UTM E NAD 27

PERMIT/WAIVER No. DW-1341 16109799002 Longitude 115.047744 N NAD 83/WGS 84

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? no

If yes, what is replacement well NOI? _____

Is there an existing well log? Yes

If yes, what is NDWR well log #? 120852

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:

From	Type of perforation	Size of perforation	feet to	To	feet
	machine slotted	0.032			
From		30	feet to	50	feet
From			feet to		feet
From			feet to		feet
From			feet to		feet

5 WATER LEVEL

Static water level 18 feet below land surface

Artesian flow _____ G.P.M. _____ P.S.I.

Water temperature _____ ° F Quality _____

6 Additional Notes or Comments

LVP Well #84

DCNR/DWR/SNBO
RECEIVED
AUG 03 2015

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:

From	Type of perforator used:	feet to	feet	Number of perms per linear foot
From				

8 WELL PLUGGING MATERIALS

From	feet to	Material Used	Pumped	Poured
From	2	feet to	10	feet concrete grout <input type="checkbox"/> Pumpe <input checked="" type="checkbox"/> Poured
From	10	feet to	12	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

Neat Cement Fluid Weight 94/7 lbs/gal

Bentonite Grout _____ % bentonite

Date Started 5/1/2014

Date Completed 5/1/2014

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 _____
issued by the State Contractor's Board 0034680

Nevada driller's license number issued by the Division of Water Resources, the on-site driller DW-2361

Signed [Signature]
By driller performing actual drilling on site or contractor

Date 7/31/2014

USE ADDITIONAL SHEETS IF NECESSARY

36.1372239
-115.0470761

NAD
2A