

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

OFFICE USE ONLY
Log No. 123338
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. 39476
WELL NAME (if applicable) MCF-12A

1 OWNER Greystone Nevada LLC
MAILING ADDRESS 2490 Paseo Verde Pkwy #120
Henderson, NV 89074

ADDRESS AT WELL LOCATION 520 Heritage Bridge Ave.
Henderson, NV
Subdivision Name _____ County Clark

2 LOCATION NE 1/4 NE 1/4 Sec 5 T 22S N/S R 63 E
PERMIT/WAIVER No 179-05-513-128
Issued by Water Resources Parcel No.

Latitude 36.069285 UTM E NAD 27
Longitude -114.961078 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? _____
If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION
Depth Drilled _____ Feet Depth Cased 365 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)
<u>4</u>	<u>PVC</u>	<u>SCH 40</u>	<u>0</u>	<u>365</u>

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: 10 feet to 0 feet
Was the casing over drilled? yes no

Existing Perforations

Type of perforation	Size of perforation	From	feet to	feet
<u>MACHINE SLOTTED</u>	<u>0.02</u>			

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

5 WATER LEVEL
Static water level 52 feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature 76 °F Quality _____

6 Additional Notes or Comments

****CASING BROKE OFF AT 10 FT BELOW GROUND SURFACE. KNOCKED OUT BOTTOM, AND GROUTED FROM BOTTOM TO TOP WITH TREMIE****

8 WELL PLUGGING MATERIALS

From	feet to	feet	Material Used	
From <u>365</u>	feet to <u>0</u>	feet	BENTONITE GROUT	<input checked="" 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
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 _____ lbs/gal
Bentonite Grout 28 % bentonite
Date Started 9/3/2015
Date Completed 9/3/2015

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 EAGLE DRILLING SERVICES, LLC.
Address 7150 PLACID ST LAS VEGAS, NV 89119

DNDR/DWR/ENBC
RECEIVED
SEP 11 2015

Nevada contractor's license number _____
issued by the State Contractor's Board 51266
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2490-LTD
Signed _____
Date 9/8/2015

36.0693098 NAD
-114.9602521 27