

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

OFFICE USE ONLY
Log No. 123339
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 39477
WELL NAME (if applicable) DBMW-15

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

ADDRESS AT WELL LOCATION 472 Sunrise Breeze Ave
Henderson, NV 89011
Subdivision Name _____ County Clark

2 LOCATION NE 1/4 NE 1/4 Sec 5 T 22S N/S R 63 E
PERMIT/WAIVER No. 179-05-513-006
Issued by Water Resources Parcel No.

Latitude 36.070765 UTM E NAD 27
Longitude -114.963034 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	63	Feet
EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
4	PVC	SCH 40	0	63

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 If pulled from: 33 feet to 0 feet
Was the casing over drilled? yes no

Existing Perforations:

Type of perforation	Size of perforation	From	feet to	feet
MACHINE SLOTTED				
	0.02			

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 41 feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature 76 °F Quality _____

6 Additional Notes or Comments

8 WELL PLUGGING MATERIALS

From	feet to	feet	Material Used	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From 63	feet to 0	feet	BENTONITE GROUT	<input checked="" type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet		<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet		<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet		<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet		<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet		<input type="checkbox"/>	<input type="checkbox"/>

CASING BROKE OFF AT 33 FT BELOW GROUND SURFACE. KNOCKED OUT BOTTOM AND GROUTED FROM BOTTOM TO TOP WITH TREMIE

Neat Cement Fluid Weight _____ lbs/gal
Bentonite Grout 28 % bentonite
Date Started 9/4/2015
Date Completed 9/4/2015

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
Nevada contractor's license number _____
issued by the State Contractors 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

DCNR/DWRS/NDRC
RECEIVED
SEP 11 2015

36.0707889 NAD
-114.9622079 27