

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

OFFICE USE ONLY
Log No. 123350
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

1 OWNER D.R. HORTON ADDRESS AT WELL LOCATION South of 3540 E. Tompkins
MAILING ADDRESS 1081 Whitney Ranch DEATH #161-19-401-011 Clark
Henderson NV Subdivision Name: _____ County: _____
NOTICE OF INTENT NO. 38884

2 LOCATION SW 1/4 SW 1/4 Sec 19 T 21 N 62 E Latitude 36-102897 UTM E NAD 27
PERMIT/WAIVER No. 161-19-401-011 Longitude -115.098206 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
Is there an existing well log? 58912
If yes, what is replacement well NOI? _____ If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION

Depth Drilled 160 Feet Depth Cased 160 Feet

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8</u>		<u>1/4</u>	<u>71</u>	<u>160</u>

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

Existing Perforations:

Type of perforation AIR
Size of perforation 3/16 x 3 SPR. FT

From	To	Type
<u>3 FT</u>	<u>160 FT</u>	<u>AIR</u>

If casing was left in place, please show where additional perforations were made:
Additional Perforations:

Type of perforator used: AIR

From	To	Number of perfs per linear foot
<u>0</u>	<u>160</u>	<u>5</u>

5 WATER LEVEL

Static water level 12 feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

8 WELL PLUGGING MATERIALS

From	To	Material Used
<u>160</u>	<u>0</u>	<input type="checkbox"/> Pumped <input checked="" type="checkbox"/> Poured
		<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
		<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
		<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
		<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
		<input type="checkbox"/> Pumped <input type="checkbox"/> Poured

6 Additional Notes or Comments

DCNR/DWR/SNBO
RECEIVED
AUG 27 2015

Neat Cement Fluid Weight _____ lbs/gal
Bentonite Grout _____ % bentonite

Date Started 8-26-15
Date Completed 8-26-15

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 VERNON H. DIMICK Contractor
Address 13040 HORSE DR. Contractor
LV. NV. 89166
Nevada contractor's license number issued by the State Contractor's Board 10062
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 552
Signed V.H. Dimick By driller performing actual drilling on-site or contractor
Date 8-27-15