

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

OFFICE USE ONLY
Log No. 123684
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. 38081
WELL NAME (if applicable): _____ Well#13

1 OWNER Clark County - Public Right of Way ADDRESS AT WELL LOCATION Patrick Lane, just east of McLeod Dr
MAILING ADDRESS 500 South Grand Central PKWY 2nd Floor Clark County, Las Vegas NV
Las Vegas NV 84155 Subdivision Name: _____ County: _____

2 LOCATION SW 1/4 NE 1/4 Sec 36 T 21S N/S R 61 E Latitude 36 04' 44.61"N UTM E _____ NAD 27
PERMIT/WAIVER No. DW-1390 162-36-699-027 Longitude 115 06 26.65"W N _____ NAD 83/WGS 8

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
Log 123070
NOI 38020
If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION
Depth Drilled 40 Feet Depth Cased 40 Feet
EXISTING CASING SCHEDULE
Size O.D. (Inches) Weight/Ft. (Pounds) Wall Thickness (Inches) From (Feet) To (Feet)
8 6 SCH 40 0 40

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: 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 _____
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From _____ feet to _____ feet Number of perfs per linear foot _____
From _____ feet to _____ feet Number of perfs per linear foot _____

Existing Perforations:
Type of perforation machine slot
Size of perforation 0.032
From 20 feet to 40 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
TYPE OF WELL = Temporary Dewatering

8 WELL PLUGGING MATERIALS
Material Used
From 0 feet to 10 feet concrete grout Pumped Poured
From 10 feet to 12 feet bentonite seal Pumped Poured
From 12 feet to 40 feet impact sand gravel Pumped Poured
From _____ feet to _____ feet _____ Pumped Poured
From _____ feet to _____ feet _____ Pumped Poured
From _____ feet to _____ feet _____ Pumped Poured
Neat Cement Fluid Weight _____ lbs/gal
Bentonite Grout _____ % bentonite

Date Started 9/11/2015
Date Completed 9/11/2015

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 2361
Signed Matthew P By driller performing actual drilling on site or contractor
Date 9/11/15

36.0790849
-115.1065728
NAD
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