

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

OFFICE USE ONLY

Log No. 123746

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. 38082
WELL NAME (if applicable): _____ Well#31

1 OWNER Clark County - Public Right of Way
MAILING ADDRESS 500 South Grand Central PKWY 2nd Floor
Las Vegas NV 84155

ADDRESS AT WELL LOCATION Patrick Lane just west of Pecos Rd
Clark County, Las Veags NV
Subdivision Name: _____ County: _____

2 LOCATION SE ¼ NE ¼ Sec 36 T 21S N/S R 62 E
PERMIT/WAIVER No. DW-1389 | 162-36-699-028
Issued by Water Resources Parcel No.

Latitude 36 04' 44.79"N UTM E NAD 27
Longitude 115 06' 15.36"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
If yes, what is NDWR well log #? NOI 38021

4 EXISTING WELL CONSTRUCTION
Depth Drilled 40 Feet Depth Cased 40 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)
8	6	SCH 40	0	40

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

Existing Perforations:

From	Type of perforation	Size of perforation	feet to	To	feet
	machine slot	0.032			
From <u>20</u>			feet to	<u>40</u>	feet
From _____			feet to	_____	feet
From _____			feet to	_____	feet
From _____			feet to	_____	feet
From _____			feet to	_____	feet

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

5 WATER LEVEL
Static water level 22 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

From	feet to	Material Used	Pumped	Poured
From <u>0</u>	feet to <u>10</u>	concrete grout	<input type="checkbox"/>	<input checked="" type="checkbox"/>
From <u>10</u>	feet to <u>12</u>	bentonite seal	<input type="checkbox"/>	<input checked="" type="checkbox"/>
From <u>12</u>	feet to <u>40</u>	impact sand gravel	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	_____	<input type="checkbox"/>	<input type="checkbox"/>

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

Date Started September 10 2015
Date Completed September 10 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 matthia
By driller performing actual drilling on site or contractor
Date 9/10/15