

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

OFFICE USE ONLY
Log No. 123868
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. 36685

1 OWNER CHURCH MINISTRIES ADDRESS AT WELL LOCATION 680 E. REGINA
MAILING ADDRESS 150 East CENTRAL PK NORTH LAS VEGAS 89115
N.L.V. NV, 89084 Subdivision Name: _____ County: CLARK
2 LOCATION NW 1/4 NW 1/4 Sec 26 T 19 N/S R 61 E Latitude N 36.274641 UTM E _____ NAD 27
PERMIT/WAIVER No. 124-26-101-008 Longitude W 115-132912 N _____ NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

3 TYPE OF WELL Is this well being plugged because a replacement well was drilled? NO Is there an existing well log? 60653
 Domestic Irrigation Test Municipal/Industrial Monitor Stock If yes, what is replacement well NOI? _____ If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION

Depth Drilled	Feet	Depth Cased	Feet

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)

Existing Perforations:

Type of perforation	Size of perforation	From	feet to	feet

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

If casing was left in place, please show where additional perforations were made:
Additional Perforations:
Type of perforator used: AIR

From	feet to	feet	Number of perfs per linear foot
<u>50</u>	<u>220</u>	<u>feet</u>	<u>5</u>

5 WATER LEVEL

Static water level 9.2 feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

8 WELL PLUGGING MATERIALS

From	feet to	feet	Material Used	Pumped	Poured
<u>50</u>	<u>220</u>	<u>feet</u>	<u>Neat Cement</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<u>0</u>	<u>50</u>	<u>feet</u>	<u>3/8 MINUS 650</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

6 Additional Notes or Comments
Pulled PUMP
Well was CLEAN

Neat Cement Fluid Weight _____ lbs/gal
Bentonite Grout _____ % bentonite
Date Started 9-11-15
Date Completed 10-21-15

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 HARSE DR. Contractor
LAS VEGAS, NEV. 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 10-26-15