

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

OFFICE USE ONLY
Log No. 124025
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. 37896
WELL NAME (if applicable): AS-14

1 OWNER Clark County Aviation
MAILING ADDRESS P.O. Box 11005 Las Vegas, NV 89111

ADDRESS AT WELL LOCATION Vacant Lot Paradise and Janice In
Las Vegas, NV 89118

2 LOCATION SE 1/4 NW 1/4 Sec 27 T 21S N/S R 61 E
PERMIT/WAIVER No. 162-27-202-002

Subdivision Name: _____ County: Clark
Latitude 36° 5' 49" N UTM E NAD 27
Longitude -115° 8' 51" 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? NO
If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION
Depth Drilled _____ Feet Depth Cased _____ 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)
<u>2.375</u>	<u>0.68</u>	<u>0.154</u>	<u>0</u>	<u>28</u>

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: _____ feet to _____ feet
Was the casing over drilled? yes no

Existing Perforations:
Type of perforation Unknown
Size of perforation _____
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 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 _____ feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

6 Additional Notes or Comments

8 WELL PLUGGING MATERIALS

Material Used			
From <u>0</u> feet to <u>28</u> feet	<u>Neat Cement</u>	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____ feet to _____ feet	_____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____ feet to _____ feet	_____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____ feet to _____ feet	_____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____ feet to _____ feet	_____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____ feet to _____ feet	_____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____ feet to _____ feet	_____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____ feet to _____ feet	_____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

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

Date Started 10/26/15
Date Completed 10/26/15

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 National EWP Contractor
Address 4221 W. Oquendo RD. Las Vegas, NV 89118 Contractor

Nevada contractor's license number _____ issued by the State Contractor's Board 0075355
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2526
Signed [Signature] By driller performing actual drilling on site of contractor
Date 10/29/2015

DENIED/MSMCO
RECEIVED
NOV 04 2015

36.0969722 NAD
-115.1466685 2A