

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

OFFICE USE ONLY
Log No. 124660
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. 36979
WELL NAME (if applicable): TUMP-3

1 OWNER JRJ PROPERTIES
MAILING ADDRESS 4021 S. MEADOWS LN. LAS VEGAS, NV 89107-3117

ADDRESS AT WELL LOCATION 2541 S. DECATUR
Subdivision Name: _____ County: _____

2 LOCATION SE 1/4 SE 1/4 Sec 61 T 240 S R 60 E
PERMIT/WAIVER No. NO-3105 163-01803-004

Latitude 36.145910 UTM E NAD 27
Longitude -115.208853 N NAD 83/WGS 84

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? _____
If yes, what is replacement well 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)

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 7' feet
Was the casing over drilled? yes no

Existing Perforations:
Type of perforation VAPOR POINT
Size of perforation _____
From 6.7 feet to 6.5 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 _____
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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 DRY 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 0' feet to 7' feet CEMENT/BENT Pumped Poured
From _____ feet to _____ feet Pumped Poured
Neat Cement Fluid Weight _____ lbs/gal
Bentonite Grout _____ % bentonite
Date Started _____
Date Completed _____

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 Cascade Drilling Contractor
Address P.O. 1184 Woodsville, WA Contractor
Nevada contractor's license number issued by the State Contractor's Board 007966
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 11935
Signed _____
Date 2-1-16
By driller performing actual drilling on site or contractor

DCNR/DWR/SNBO
RECEIVED
FEB 02 2016

36.1459401 NAD
-115.2082184 27