

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

OFFICE USE ONLY  
Log No. **108168**  
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. **32174**

1 OWNER **RHDH PROPERTIES LLC C/O LAW DEPT.** ADDRESS AT WELL LOCATION **1600 N. RANCHO DR**  
MAILING ADDRESS **399 WALL ST. #4** **LAS VEGAS NV.**  
**GLENDALE HEIGHTS ILL 60139** Subdivision Name: \_\_\_\_\_ County: **CLARK**

2 LOCATION **SW 1/4 Sec 20 T 20 N/S R 01 E** Latitude **36° 11.324 N** UTM E \_\_\_\_\_  NAD 27  
PERMIT/WAIVER No. **1139-20-411-005** Longitude **(115° 11.116 W)** N \_\_\_\_\_  NAD 83/WGS 84  
Issued by Water Resources Parcel No. \_\_\_\_\_

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? **NO**  
If yes, what is replacement well NOI? \_\_\_\_\_ If yes, what is NDWR well log #? \_\_\_\_\_

4 EXISTING WELL CONSTRUCTION

Depth Drilled **19** Feet Depth Cased **19** Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>2</b>		<b>SC440</b>	<b>0</b>	<b>19</b>

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: \_\_\_\_\_

Existing Perforations:  
Type of perforation **MACHINE SLOT**  
Size of perforation **.020**  
From **9** feet to **19** feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet

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: \_\_\_\_\_

5 WATER LEVEL  
Static water level **16.1** feet below land surface  
Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

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

6 Additional Notes or Comments  
**FACILITY ID NO. 8-000609**

8 WELL PLUGGING MATERIALS

From	feet to	feet	Material Used	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
From <b>0</b>	feet to <b>.25</b>	feet	<b>ASPHALT</b>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
From <b>.25</b>	feet to <b>.5</b>	feet	<b>CONCRETE</b>	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
From <b>.5</b>	feet to <b>19</b>	feet	<b>BENTONITE</b>	<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

Neat Cement Fluid Weight \_\_\_\_\_ lbs/gal  
Bentonite Grout \_\_\_\_\_ % bentonite  
Date Started **3-18-09**  
Date Completed **3-18-09**

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 **EAGLE DRILLING** Contractor  
Address **7150 PLACID ST LAS VEGAS NV, 89119** Contractor

Nevada contractor's license number **51266**  
issued by the State Contractor's Board  
Nevada driller's license number issued by the **2357**  
Division of Water Resources, the on-site driller

Signed **Mud Hunter**  
Date **3-25-2009**  
By driller performing actual drilling on-site or contractor

**DCNR/DWR RECEIVED**  
**MAR 30 2009**  
**LAS VEGAS OFFICE**

USE ADDITIONAL SHEETS IF NECESSARY

(Rev. 05-06)

(NSPD 3-08)