

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

OFFICE USE ONLY
Log No. 111025
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. 35230

1 OWNER Clark County (Public Right of Way)
MAILING ADDRESS 500 S. Grand Central Pkwy
Las Vegas, NV 89122-5507

ADDRESS AT WELL LOCATION Public Right of Way (Deer St.)
Subdivision Name _____ County Clark

2 LOCATION SE 1/4 SE 1/4 Sec 13 T 16S N/S/R 67 E
PERMIT/WAIVER No. DW-1299 7013899016
Issued by Water Resources Parcel No

Latitude 36 32'08.83 UTM E NAD 27
Longitude 114 26'15.92 N NAD 83/WGS 84

3 3-1/2" decontaminating
 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? _____
If yes, what is NDWR well log #? _____

4 **EXISTING WELL CONSTRUCTION**
Depth Drilled 40 Feet Depth Cased 40 Feet

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
8	6	3/8	0	40

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: _____

Existing Perforations:

Type of perforation	Size of perforation	From	To
machine slotted	0.032		

Type of perforator used:

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 _____

8 **WELL PLUGGING MATERIALS**

From	feet to	feet	Material Used	Pumped	Poured
0		12	concrete grout	<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"/>
				<input type="checkbox"/>	<input type="checkbox"/>

6 **Additional Notes or Comments**

10 well

RECEIVED
APR 23 2010
LAS VEGAS OFFICE

Neat Cement Fluid Weight 94/7 lbs/gal
Bentonite Grout _____ % bentonite
Date Started 3/23/2010
Date Completed 3/23/2010

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 801 Northport Dr. Contractor
Sacramento, CA 95691
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 DEW-2361
Signed _____
Date 4/14/2010
By driller performing actual drilling on site or contractor