

AP 2

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

OFFICE USE ONLY  
Log No. **111945**  
Permit No. \_\_\_\_\_  
Basin **212**

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 **34479**

1 OWNER **JASUE LLC ETAL**  
MAILING ADDRESS **3600 W SARARA Las Vegas NV 89102**

ADDRESS AT WELL LOCATION **3600 W SARARA Las Vegas**  
Subdivision Name \_\_\_\_\_ County **CLARK**

2 LOCATION **SW 1/4 Sec 05 T 21 N R 61 E**  
PERMIT/WAIVER No **H000789 16205402004**

Latitude **36.084640** UTM E  NAD 27  
Longitude **115.112244** 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? \_\_\_\_\_  
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 **25** Feet Depth Cased **25** Feet

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<b>2"</b>	<b>PVC</b>	<b>Sch 40</b>	<b>0</b>	<b>25</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: \_\_\_\_\_  
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: \_\_\_\_\_

Existing Perforations:  
Type of perforation \_\_\_\_\_  
Size of perforation \_\_\_\_\_  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
From \_\_\_\_\_ feet to \_\_\_\_\_ feet

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 \_\_\_\_\_

5 WATER LEVEL  
Static water level **12** feet below land surface  
Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
Water temperature \_\_\_\_\_ °F Quality \_\_\_\_\_

8 WELL PLUGGING MATERIALS

From	feet to	Material Used	Pumped	Poured
From <b>0</b>	feet to <b>25</b>	<b>Hold Plug</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
From _____	feet to _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	_____	<input type="checkbox"/>	<input type="checkbox"/>

6 Additional Notes or Comments  
**Removal of well box**  
**pulled casing**  
**Plug from 13.077m to top with Hold Plug 3/4"**  
**DCNR/DWR RECEIVED**

Neat Cement Fluid Weight \_\_\_\_\_ lbs/gal  
Bentonite Grout \_\_\_\_\_ % bentonite  
Date Started **7-7-10**  
Date Completed **7-7-10**

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 Street 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 Division of Water Resources, the operator driller **2097**  
Signed \_\_\_\_\_  
By driller performing actual drilling on site or contractor  
Date **7-15-10**

(Rev 05-06)

JUL 21 2010

USE ADDITIONAL SHEETS IF NECESSARY

LAS VEGAS OFFICE