

AP 9

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

OFFICE USE ONLY
Log No. 111947
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 34482

1 OWNER SPOKES
MAILING ADDRESS 3540 W SAHARA
Las Vegas NV

ADDRESS AT WELL LOCATION 3540 W SAHARA
Las Vegas NV
Subdivision Name _____
County CLARK

2 LOCATION S44 SN 1/4 Sec 05 T 21 N R 61 E
PERMIT/WAIVER No 17000789 162-05-402-006
Parcel No. _____

Latitude 36.084633 UTM E _____
Longitude 115.111775 N _____
 NAD 27
 NAD 83/WGS 84

3 TYPE OF WELL
 Domestic
 Municipal/Industrial
 Irrigation
 Monitor
 Test
 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 67 Feet Depth Cased 67 Feet

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: _____

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>2"</u>	<u>PVC</u>	<u>Sch 40</u>	<u>0</u>	<u>67</u>

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		

Additional Perforations:

Type of perforater used:	From	feet to	feet	Number of perfs per linear foot
	From			

5 WATER LEVEL
Static water level 11 feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature _____ °F Quality _____

8 WELL PLUGGING MATERIALS

Material Used	From	feet to	feet	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
<u>Hard Plug</u>	From <u>0</u>	feet to <u>67</u>	feet	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	From			<input type="checkbox"/>	<input type="checkbox"/>
	From			<input type="checkbox"/>	<input type="checkbox"/>
	From			<input type="checkbox"/>	<input type="checkbox"/>
	From			<input type="checkbox"/>	<input type="checkbox"/>
	From			<input type="checkbox"/>	<input type="checkbox"/>

6 Additional Notes or Comments
REMOVAL OF Well BOX
pulled casing
Plug from
Bottom
to
TOP WITH
Hard Plug
3/4"
CONFIDENTIAL RECEIVED
JUL 21 2010

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 Contractor
Las Vegas NV 89119
Nevada contractor's license number 51266
issued by the State Contractor's Board
Nevada driller's license number issued by the 2097
Division of Water Resources, the on-site driller
Signed _____
By driller performing actual drilling on site or contractor
Date 7-16-10

USE ADDITIONAL SHEETS IF NECESSARY

LAS VEGAS OFFICE