

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

OFFICE USE ONLY
 Log No. 114194
 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. 35921

1 OWNER COUNTY OF CLARK AVIATION ADDRESS AT WELL LOCATION PARADISE
 MAILING ADDRESS P.O. BOX 11005 LAS VEGAS AIRPORT ECONOMY PARKING LOT
NV. 89111 Subdivision Name: _____ County: CLARK

2 LOCATION SW 1/4 NW 1/4 Sec 27 T 21 N 36 E Latitude 36° 05' 47.00" N UTM E NAD 27
 PERMIT/WAIVER No. 163-27-201-002 Longitude 115° 09' 01.65" 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
 If yes, what is replacement well NO? _____
 Is there an existing well log? NO
 If yes, what is NDWR well log #? _____

4 **EXISTING WELL CONSTRUCTION**
 Depth Drilled 14 Feet Depth Cased 16 Feet
EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>1</u>		<u>SCM 40</u>	<u>D</u>	<u>16</u>

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:
 Type of perforator used: NONE

Existing Perforations:
 Type of perforation .5'
 Size of perforation 0.020

From	feet to	feet	feet
<u>15.5</u>		<u>16</u>	

From	feet to	feet	Number of perfs per linear foot

5 **WATER LEVEL**
 Static water level NONE 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	Material	Pumped	Poured
<u>0</u>		<u>1</u>	<u>CONCRETE</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>1</u>		<u>16</u>	<u>CEMENT GROUT</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

6 Additional Notes or Comments
VAPOR EXHAUSTION WELL
WELL NO PSS 16

From	feet to	feet	Material	Pumped	Poured
				<input type="checkbox"/>	<input type="checkbox"/>

Neat Cement Fluid Weight 94 lbs/gal 5.2
 Bentonite Grout _____ % bentonite
 Date Started 6-29-2011
 Date Completed 6-29-2011

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 EALIE DRILLING Contractor
 Address 7150 PLACID ST. LAS VEGAS 89119 Contractor
 Nevada contractor's license number issued by the State Contractor's Board 51266
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2357

Signed Neil J. Wiktor By driller performing actual drilling on site or contractor
 Date 6-29-2011

DCNR/DWR
 RECEIVED