

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

OFFICE USE ONLY
Log No. 116141
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. 36896

1 OWNER Clark County
MAILING ADDRESS 500 S. Grand Central Pkwy
Las Vegas, NV 89155

ADDRESS AT WELL LOCATION Lake Mead between I-15 & Losse
well 12002
Subdivision Name: _____ County: Clark

2 LOCATION SW 1/4 NE 1/4 Sec 22 T 20S N35 R 8E F
PERMIT/WAIVER No. DW-1326A 139-22-696-001
Issued by Water Resources Parcel No

Latitude 36 11'45.81499"N UTM E NAD 27
Longitude 115 08'26.40529"W 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? NO
If yes, what is replacement well NOI? _____

Is there an existing well log? N/A
If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION
Depth Drilled 30 Feet Depth Cased 30 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: _____

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/ft (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>10.75</u>		<u>Sch 40</u>	<u>0</u>	<u>30</u>

Was the well contaminated? yes no
Was the casing pulled? yes no
Was the casing over drilled? yes no

Existing Perforations:

Type of perforation	Factory Slotted
Size of perforation <u>15</u> feet to <u>30</u> feet	<u>0.08</u>
From _____ feet to _____ feet	_____
From _____ feet to _____ feet	_____
From _____ feet to _____ feet	_____
From _____ feet to _____ feet	_____
From _____ feet to _____ feet	_____

If casing was left in place, please show where additional perforations were made:
Additional Perforations:
Type of perforator used:
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____
From _____ feet to _____ feet Number of perms per linear foot _____

5 WATER LEVEL
Static water level 16.35 feet below land surface
Artesian flow _____ G.P.M. P.S.I.
Water temperature _____ °F Quality _____

WELL PLUGGING MATERIALS

From	Material Used	
From <u>0</u> feet to <u>30</u> feet	Cement	<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
From _____ feet to _____ feet		<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
From _____ feet to _____ feet		<input type="checkbox"/> Pumped <input type="checkbox"/> Poured

6 Additional Notes or Comments
Knocked out bottom, tremie from bottom up, pulled casing, top off.

Neat Cement Fluid Weight 94/5.2 lbs/gal
Bentonite Grout _____ % bentonite
Date Started 1/8/2013
Date Completed 1/8/2013

**DCNR/DWR
RECEIVED**

JAN 30 2013

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 Cascade Drilling L.P.
Contractor
Address 4590 Copper Sage St
Contractor
Las Vegas, NV 89115
Nevada contractor's license number _____
issued by the State Contractor's Board C23-0073966
Nevada driller's license number issued by the _____
Division of Water Resources, the on-site driller 2381
Signed _____
By driller performing actual drilling on site or contractor
Date 1-15-13

USE ADDITIONAL SHEETS IF NECESSARY

LAS VEGAS OFFICE

36.196090
-115.139833 - NAD 27

(Rev 02-04)