

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

OFFICE USE ONLY
Log No. 118882
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. 37703

1 OWNER Archland Property ILLC%27-0287%TARLT
MAILING ADDRESS 1775 N. Martin Luther King #200
Las Vegas, NV 89106-2101

ADDRESS AT WELL LOCATION 4401 W. Sahara Ave
GWR-4 Las Vegas
Subdivision Name: _____ County: Clark

2 LOCATION NE $\frac{1}{4}$ NW $\frac{1}{4}$ Sec 7 T 21S N/S R 61 E
PERMIT/WAIVER No. R-1631 162-07-101-019
Issued by Water Resources Parcel No.

Latitude 36 08' 38.47"N UTM E _____ NAD 27
Longitude 115 11' 59.96"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 _____ Feet Depth Cased N/A Feet

7 WELL PLUGGING PROCEDURE
Was well cleaned out to total depth? yes no

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
6.625		Sch 40	0	N/A

If well was not cleaned out to total depth, please explain why: _____

Existing Perforations:

Type of perforation	Factory Slotted
Size of perforation _____	n/a
From _____ feet to _____ feet	
From _____ feet to _____ feet	
From _____ feet to _____ feet	
From _____ feet to _____ feet	
From _____ feet to _____ feet	

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:	From	feet to	feet	Number of perfs per linear foot
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

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

8 WELL PLUGGING MATERIALS

6 Additional Notes or Comments
Pressure Grout well

**DCNR/DWR/SNEC
RECEIVED
DEC 2 0 2013**

From	feet to	feet	Material Used	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
_____	_____	_____	Neat Cement	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
_____	_____	_____	_____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
_____	_____	_____	_____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
_____	_____	_____	_____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
_____	_____	_____	_____	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

Neat Cement Fluid Weight 94 lbs/gal
Bentonite Grout _____ % bentonite
Date Started 11/20/2013
Date Completed 11/20/2013

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 11-18-13

USE ADDITIONAL SHEETS IF NECESSARY

MAD 27
36.1442193
-115.1991546

(Rev. 05-06)