

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

OFFICE USE ONLY
Log No. 119039
Permit No. 60828
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. 37626

1 OWNER H.K.M. Nevada Prop. LLC ADDRESS AT WELL LOCATION 11655 BERMUDA
MAILING ADDRESS 730 HOWE AVE #600 LV. NV. (ENTERPRISE) 89123
SACRAMENTO CA, 95825-4641 Subdivision Name: _____ County: CLARK
2 LOCATION SE 1/4 NE 1/4 Sec 04 T 23 N 35 R 61 E Latitude N.35-58-45.1 UTM E _____ NAD 27
PERMIT/WAIVER No. 60828 191-04-602-019 Longitude W.115-09-19.1 N _____ NAD 83/WGS 84
Issued by Water Resources Parcel No. _____

3 TYPE OF WELL Commercial Is this well being plugged because a replacement well was drilled? NO Is there an existing well log? yes
 Domestic Irrigation Test Block
 Municipal/Industrial Monitor Block If yes, what is replacement well NOI? _____ If yes, what is NDWR well log #? 65053

4 EXISTING WELL CONSTRUCTION

Depth Drilled 500 Feet 500 Depth Cased 500 Feet

EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>8 5/8</u>	<u>16.9</u>	<u>3/16</u>	<u>+2</u>	<u>500</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: _____

Existing Perforations:

Type of perforation	Size of perforation	From	To
<u>AIR PERFORATOR</u>	<u>3/16</u>	<u>200</u>	<u>500</u>

Additional Perforations:

Type of perforator used:	From	To	Number of perfs per linear foot
<u>AIR PERFORATOR</u>	<u>200</u>	<u>500</u>	<u>12</u>

5 WATER LEVEL

Static water level 220 feet below land surface

Artesian flow _____ G.P.M. _____ P.S.I.

Water temperature _____ °F Quality _____

8 WELL PLUGGING MATERIALS

From	To	Material Used	Pumped	Poured
<u>200</u>	<u>500</u>	<u>NEAT</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>0</u>	<u>200</u>	<u>5 SACK MIX</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

6 Additional Notes or Comments

6 yds of Neat Cement
200 FT TO 500 FT
2" Tremie Plastic Pipe

4 yds of 5 Sack Mix
0 FT TO 200 FT Poured

Neat Cement Fluid Weight _____ lbs/gal

Bentonite Grout _____ % bentonite

Date Started 11-05-13

Date Completed 11-05-13

DCNR/DWR/SNBO
RECEIVED
NOV 07 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 VERNON H. DIMICK Contractor

Address 13040 HORSE DR. LV. NV. 89116 Contractor

Nevada contractor's license number _____ issued by the State Contractor's Board 10062

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 552

Signed V. H. Dimick By driller performing actual drilling on-site or contractor

Date 11-6-13

(Rev. 05-08)

USE ADDITIONAL SHEETS IF NECESSARY