

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

OFFICE USE ONLY
Log No. 119723
Permit No. _____
Basin _____

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. 37082
WELL NAME (if applicable): VE-1

1 OWNER 7-Eleven Inc
MAILING ADDRESS PO Box 711
Dallas TX 75221-0711

ADDRESS AT WELL LOCATION 2716 E. Lake Mead Blvd.
N. Las Vegas
Subdivision Name: _____ County: Clark

2 LOCATION SE 1/4 NW 1/4 Sec 24 T 20S N/S R 61 E
PERMIT/WAIVER No. 139-24-210-144

Latitude 36°11'46"N UTM E NAD 27
Longitude 115°06'42"W N NAD 83/WGS 8

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? _____
If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION

Depth Drilled	<u>12</u> Feet	Depth Cased	<u>12</u> Feet
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EXISTING CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>1</u>	<u>0.333</u>	<u>1.029</u>	<u>0</u>	<u>12</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 If pulled from: 0 feet to 10 feet
Was the casing over drilled? yes no

Existing Perforations:

Type of perforation	Factory
Size of perforation	<u>0.02</u>
From <u>7</u> feet to <u>12</u> 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 perfs per linear foot
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____
From _____	feet to _____	feet	_____

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

6 Additional Notes or Comments

8 WELL PLUGGING MATERIALS

From	feet to	feet	Material Used	<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From <u>0</u>	feet to <u>5</u>	feet	<u>Asphalt</u>	<input type="checkbox"/>	<input type="checkbox"/>
From <u>0.5</u>	feet to <u>1</u>	feet	<u>3/4" Pea Rock</u>	<input type="checkbox"/>	<input type="checkbox"/>
From <u>1</u>	feet to <u>12</u>	feet	<u>Bent. Grout</u>	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to _____	feet	_____	<input type="checkbox"/>	<input type="checkbox"/>

Neat Cement Fluid Weight _____ lbs/gal
Bentonite Grout _____ % bentonite
Date Started 2/9/2014
Date Completed 2/9/2014

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 National Exploration Wells & Pumps
Address 5566 Arrow Highway-Montclair, CA 91763
Nevada contractor's license number _____
issued by the State Contractor's Board 00735355
Nevada driller's license number issued by the Division of Water Resources, 211-M-T1
Signed _____
By driller performing actual drilling on site or contractor
Date 2/18/2014

CONFIRMED RECEIVED
MAR 10 2014

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