

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

OFFICE USE ONLY
 Log No. 121253
 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. 37150

1 OWNER County of Clark (PK & Comm Serv)
 MAILING ADDRESS 500 S. Grand Central Pkwy
 Las Vegas, NV 89155

ADDRESS AT WELL LOCATION 5483 Clubhouse Dr
 Subdivision Name: _____ County: _____

2 LOCATION SW ¼ SE ¼ Sec 4 T 21S N/S R 62 E
 PERMIT/WAIVER No. DW-1335 16104701002
Issued by Water Resources Parcel No.

Latitude UTME 812670.9 NAD 27
 Longitude N 26 755677.2 NAD 83/WGS 84
State Plane

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 50 Feet Depth Cased 50 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) |
| 8 | 6 | 3/8 | 0 | 50 |
| | | | | |
| | | | | |

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:

Existing Perforations:

| Type of perforation | Size of perforation | From | feet to | feet |
|---------------------|---------------------|------|---------|---------|
| machine slotted | 0.032 | 30 | feet to | 50 feet |
| | | | feet to | feet |
| | | | feet to | feet |
| | | | feet to | feet |
| | | | feet to | feet |

Type of perforator used:

| From | feet to | feet | Number of perfs per linear foot |
|------|---------|------|---------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

5 WATER LEVEL
 Static water level _____ 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

| From | feet to | feet | Material Used | <input type="checkbox"/> Pumped | <input checked="" type="checkbox"/> Poured |
|------|---------|---------|-----------------|---------------------------------|--|
| 2 | feet to | 10 feet | concrete grout | <input type="checkbox"/> Pumped | <input checked="" type="checkbox"/> Poured |
| 10 | feet to | 12 feet | bentonite chips | <input type="checkbox"/> Pumped | <input checked="" type="checkbox"/> Poured |
| | feet to | feet | | <input type="checkbox"/> Pumped | <input type="checkbox"/> Poured |
| | feet to | feet | | <input type="checkbox"/> Pumped | <input type="checkbox"/> Poured |
| | feet to | feet | | <input type="checkbox"/> Pumped | <input type="checkbox"/> Poured |
| | feet to | feet | | <input type="checkbox"/> Pumped | <input type="checkbox"/> Poured |

LVP Well #121

Neat Cement Fluid Weight 94/7 lbs/gal
 Bentonite Grout % bentonite _____
 Date Started 5/2/2014
 Date Completed 5/2/2014

BOARD OF WATER RESOURCES
 REVIEWED
 SEP 29 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 Viking Drillers Inc Contractor
 Address 5950 Granite Lake Dr. Contractor
 Granite Bay, CA 95691
 Nevada contractor's license number issued by the State Contractor's Board 0034680
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller DW-2361
 Signed _____
 Date 7/31/2014
By driller performing actual drilling on site or contractor

(Rev. 05-05) USE ADDITIONAL SHEETS IF NECESSARY

36.1473565
 -115.0523971
 NAD 27