

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

OFFICE USE ONLY
Log No. 121293
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. 37247
WELL NAME (if applicable): AC-4

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

ADDRESS AT WELL LOCATION 5600 Weisner Way
Henderson, Nv 89122
Subdivision Name: _____ County: Clark

2 LOCATION SE ¼ SW ¼ Sec 25 T 21S N/S R 62 E
PERMIT/WAIVER No. 161-25-401-001
Issued by Water Resources Parcel No. _____

Latitude 36.0860131 UTM E NAD 27
Longitude -115.0063221 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 _____ 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>4</u>	<u>PVC</u>	<u>SCH 40</u>	<u>0</u>	<u>30</u>

Was the well contaminated? yes no
Was the casing pulled? yes no If pulled from: _____ feet to _____ feet
Was the casing over drilled? yes no

Existing Perforations:
Type of perforation _____
Size of perforation _____
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 Number of perfs per linear foot _____
From _____ feet to _____ feet Number of perfs per linear foot _____
From _____ feet to _____ feet Number of perfs per linear foot _____
From _____ feet to _____ feet Number of perfs per linear foot _____
From _____ feet to _____ feet Number of perfs per linear foot _____
From _____ feet to _____ feet Number of perfs per linear foot _____
From _____ feet to _____ feet Number of perfs per linear foot _____
From _____ feet to _____ feet Number of perfs per linear foot _____
From _____ feet to _____ feet Number of perfs per linear foot _____
From _____ feet to _____ feet Number of perfs per linear foot _____

5 WATER LEVEL
Static water level 15 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

SSFUL CASING BROKE AT 2 1/2 FEET BELOW GROUND SURF

				Material Used	
From	<u>30</u>	feet to	<u>10</u>	Bentonite Grout	<input checked="" type="checkbox"/> Pumped <input type="checkbox"/> Poured
From	<u>10</u>	feet to	<u>0</u>	Concrete	<input type="checkbox"/> Pumped <input checked="" type="checkbox"/> Poured
From		feet to			<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
From		feet to			<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
From		feet to			<input type="checkbox"/> Pumped <input type="checkbox"/> Poured
From		feet to			<input type="checkbox"/> Pumped <input type="checkbox"/> Poured

Neat Cement Fluid Weight _____ lbs/gal
Bentonite Grout _____ % bentonite

Date Started 10/20/2014
Date Completed 10/20/2014

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 Eagle Drilling Services Contractor
Address 7150 Placid St. Las Vegas, Nv 89119 Contractor

Nevada contractor's license number issued by the State Contractor's Board 51266

Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2490-LTD

Signed _____
By _____ performing actual drilling on site or contractor

Date 10/20/2014

36.086038
-115.0054939
NAD
27