

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

OFFICE USE ONLY
Log No. 123277
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. 37820
WELL NAME (if applicable): MW-2

1 OWNER Speedee Mart Inc. /Walter & Sherolyn Emery ADDRESS AT WELL LOCATION 569 East Sahara Ave
MAILING ADDRESS 1188 Wigwam Pkwy Las Vegas
Henderson NV 89074-81541 Clark

2 LOCATION NE ¼ NW ¼ Sec 10 T 21S N/SR 61 E Latitude 36.143556 UTM E NAD 27
PERMIT/WAIVER No. 162-10-112-021 Longitude -115.148035 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? _____
If yes, what is replacement well NO? _____
Is there an existing well log? _____
If yes, what is NDWR well log #? _____

4 EXISTING WELL CONSTRUCTION
Depth Drilled 25 Feet Depth Cased 23 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)
4.500	2.01	4.026	0	23

Was the well contaminated? yes no
Was the casing pulled? yes no If pulled from: 0 feet to 23 feet
Was the casing over drilled? yes no

Existing Perforations:

Type of perforation	Factory
From <u>8</u> feet to <u>23</u> feet	<u>0.02</u>
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
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

5 WATER LEVEL
Static water level 11 feet below land surface
Artesian flow NA G.P.M. _____ P.S.I. _____
Water temperature NA °F Quality Clear

6 Additional Notes or Comments

8 WELL PLUGGING MATERIALS

Material Used

From	feet to	feet	Material	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From <u>0</u>	feet to	<u>23</u>	Cement	<input checked="" type="checkbox"/>	<input type="checkbox"/>
From _____	feet to	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
From _____	feet to	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

Neat Cement Fluid Weight 9 lbs/1 gal lbs/gal
Bentonite Grout _____ % bentonite
Date Started 27-Mar
Date Completed 27-Mar

DCNR/DWR/SNBO
RECEIVED
APR 16 2015

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 EWP Contractor
Address 5241 Schirls Street, Las Vegas, NV 89118 Contractor
Nevada contractor's license number _____
issued by the State Contractor's Board 0075355
Nevada driller's license number issued by the Division of Water Resources, the on-site driller 2512-LTD
Signed Bob [Signature]
By driller performing actual drilling on site or contractor
Date 15-Apr