

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

OFFICE USE ONLY
Log No. 124098
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. 39486
WELL NAME (if applicable): MW-9

1 OWNER Convoy Crossroads LTD / Jack In The Box Inc ADDRESS AT WELL LOCATION 4866 S. MARYLAND PKWY
MAILING ADDRESS 9330 Balboa Ave. LAS VEGAS, NV 89119
San Diego, CA 92123-1516 Subdivision Name: _____ County: Clark

2 LOCATION SW ¼ SW ¼ Sec 23 T 21S N/S R 61 E Latitude 36.101478 UTM E NAD 27
PERMIT/WAIVER No. 162-23-403-004 Longitude -115.136261 N NAD 83/WGS 84
Issued by Water Resources Parcel No.

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

4 EXISTING WELL CONSTRUCTION
Depth Drilled _____ Feet Depth Cased 27 Feet

EXISTING CASING SCHEDULE				
Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
2	PVC	SCH 40	0	27

Existing Perforations:

Type of perforation	MACHINE SLOTTED			
Size of perforation	0.02			
From _____	12	feet to	27	feet
From _____		feet to		feet
From _____		feet to		feet
From _____		feet to		feet
From _____		feet to		feet

5 WATER LEVEL
Static water level 16 feet below land surface
Artesian flow _____ G.P.M. _____ P.S.I.
Water temperature 78 °F Quality _____

6 Additional Notes or Comments

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 27 feet
Was the casing over drilled? yes no
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 _____

8 WELL PLUGGING MATERIALS

Material Used			
From <u>27</u> feet to <u>1</u> feet	BENTONITE GROUT	<input checked="" type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From <u>1</u> feet to <u>0</u> feet	CONCRETE	<input type="checkbox"/> Pumped	<input checked="" type="checkbox"/> Poured
From _____ feet to _____ feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____ feet to _____ feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____ feet to _____ feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured
From _____ feet to _____ feet		<input type="checkbox"/> Pumped	<input type="checkbox"/> Poured

Neat Cement Fluid Weight _____ lbs/gal
Bentonite Grout 28 % bentonite

Date Started 10/1/2015
Date Completed 10/1/2015

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 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 [Signature]
By driller performing actual drilling on site & contractor

Date 10/6/2015

36.1015056
- 115.1354295
NAD
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